2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000393

Entity Name: GRACE FAMILY CHURCH, INC.

FILED Mar 04, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2910 NORWAY PINE LANE LANTANA, FL 33462

Current Mailing Address: New Mailing Address:

P.O. BOX 22222 WEST PALM BEACH, FL 334162222

FEI Number: 65-0386183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LADD, BRIAN K
43 MEADOWS DRIVE
BOYNTON BEACH, FL 33436 US

MCDANIEL, JOHNNY F
2910 NORWAY PINE LANE
LANTANA, FL 33462 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHNNY F. MCDANIEL 03/04/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: VPD (X) Change () Addition

 Name:
 RAY, JOE
 Name:
 RAY, JOE

 Address:
 2565 CEDARCREST RD
 Address:
 2565 CEDARCREST RD

 City-St-Zip:
 WEST PALM BEACH, FL
 City-St-Zip:
 WEST PALM BEACH, FL

Title: D () Delete Title: D (X) Change () Addition

 Name:
 RAPE, PHYLLIS
 Name:
 RAPE, PHYLLIS

 Address:
 1618 NE 4TH CT
 Address:
 5292 S.E. GRAHAM DR.

 City-St-Zip:
 BOYNTON BEACH, FL 33435
 City-St-Zip:
 STUART, FL 34997

Title: PD () Delete Title: () Change () Addition

 Name:
 MCDANIEL, JOHNNY F
 Name:

 Address:
 2910 NORWAY PINE LANE
 Address:

 City-St-Zip:
 LANTANA, FL 33462
 City-St-Zip:

Title: VPD () Delete Title: SD (X) Change () Addition

Name: LADD, BRIAN K Name: ROBINSON, SANDRA T Address: 43 MEADOWS DRIVE Address: 1664 42ND ST.

Address: 43 MEADOWS DRIVE Address: 1664 42ND ST.
City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: WEST PALM BEACH, FL 33407

Address: 3883 BLUE SPRUCE COURT Address: 5292 S.E. GRAHAM DR. City-St-Zip: LANTANA, FL 33462 City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHNNY F. MCDANIEL PD 03/04/2006