2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006
Secretary of State

DOCUMENT# N93000003017

Entity Name: GRACE CHRISTIAN SCHOOL, INC.

Current Principal Place of Business:

204 BRANTLEY RD
GRANDIN, FL 321380008

New Principal Place of Business:

6834 SE 221ST ST
HAWTHORNE, FL 32640

Current Mailing Address:

POB 8
GRANDIN, FL 321380008

New Mailing Address:

POB 793
HAWTHORNE, FL 326400793

FEI Number: 59-3190826 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CARTER, SHARON W
126 LAKE GREEN SILLS RD
PO BOX 556
MELROSE, FL 326660556 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DVPT ( ) Delete
Name: CARTER, ARTHUR L
Address: 126 LAKE GREEN SILLS RD
City-St-Zip: MELROSE, FL 326660556

Title: DP ( ) Delete
Name: CARTER, SHARON W
Address: 126 LAKE GREEN SILLS RD
City-St-Zip: MELROSE, FL 326660556

Title: DS ( ) Delete
Name: HOFFMAN, MARTIN K
Address: 4814 W. WOODLAWN ST
City-St-Zip: DUNNELLON, FL 34432

Title: D (X) Delete
Name: MUSTERED, JEREMIAH J
Address: 204 BRANTLEY RD
City-St-Zip: GRANDIN, FL 321380157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SHARON W CARTER DP 04/20/2006

Electronic Signature of Signing Officer or Director — Date