2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001567

Entity Name: GRACE FELLOWSHIP CENTER INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: N	lew Principal Place of Business:
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4240 CENTRAL AVE ST PETERSBURG, FL 33711

Current Mailing Address: New Mailing Address:

4240 CENTRAL AVE ST PETERSBURG, FL 33711

FEI Number: 59-3428948 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

 WILSON, LEONARD
 LEONARD WILSON

 3771 141ST PL N
 3771 141ST PL N

 LARGO, FL 33771
 US

 LARGO, FL 33771
 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: LEONARD WILSON 04/28/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WILSON, LEONARD
 Name:

 Address:
 3771 141ST PL N
 Address:

 City-St-Zip:
 LARGO, FL 33711
 City-St-Zip:

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

 Name:
 WILSON, DOROTHY
 Name:
 DOROTHY A WILSON,

 Address:
 3771 141ST PL N
 Address:
 3771 141ST PL N

 City-St-Zip:
 LARGO, FL 33771
 City-St-Zip:
 LARGO, FL 33771

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

 Name:
 BOYKINS, ANGELO
 Name:

 Address:
 8400-49TH STREET NORTH #1707
 Address:

 City-St-Zip:
 PINELLAS PARK, FL 33781
 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: DOROTHY A WILSON D 04/28/2006