

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005370

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** WAY OF GRACE MINISTRIES, INC.

**Current Principal Place of Business:**

8550 CLARCONA-OCOEE ROAD  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

8550 CLARCONA-OCOEE ROAD  
ORLANDO, FL 32818

**New Mailing Address:**

**FEI Number:** 59-3468595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRANT, RICHARD W  
8550 CLARCONA-OCOEE RD.  
ORLANDO, FL 32818 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:** PRES  
**Name:** GRANT, RICHARD W  
**Address:** 281 LIGHTHOUSE COVE CT APT 103  
**City-St-Zip:** OCOEE, FL 34761

**Title:** LGLC  
**Name:** MCMILLAN, HERBERT  
**Address:** 4828 LAKE SPARLING ROAD  
**City-St-Zip:** ORLANDO, FL 32810

**Title:** TREA  
**Name:** REID, SYDNEY  
**Address:** 5855 INGRAM RD  
**City-St-Zip:** APOPKA, FL 32703

**Title:** SEC  
**Name:** COSTA, DAWN  
**Address:** 7449 CROOKED LAKE CIRCLE  
**City-St-Zip:** ORLANDO, FL 32818

I hereby 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 all other like empowered.

**SIGNATURE:** LESLIE GILLIS

ADMI

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date