2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006
Secretary of State

DOCUMENT# N97000006402

Entity Name: SHOWERS OF GRACE EVANGELICAL CHRISTIAN MISSION, INC.

Current Principal Place of Business:

2009 FULLER CROSS ROAD
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

821 KENSINGTON DR.
ORLANDO, FL 328088038

New Mailing Address:

830 MCPHERSON PL
WINTER GARDEN, FL 34787

FEI Number: 59-3486661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VASQUEZ, LEONARDO A
821 KENSINGTON DR.
ORLANDO, FL 328088038 US

Name and Address of New Registered Agent:

VASQUEZ, LEONARDO A
830 MCPHERSON PL
WINTER GARDEN, FL 34787 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: LEONARDO VASQUEZ 01/26/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: VASQUEZ, LEONARDO A
Address: 821 KENSINGTON DR.
City-St-Zip: ORLANDO, FL 328088038

Title: D ( ) Delete
Name: HERNANDEZ, BENIGNO
Address: 3809 HOLLY COURT/P.O BOX 1115
City-St-Zip: ZELLWOOD, FL 32798

Title: D ( ) Delete
Name: GAITAN, CARLOS
Address: 3284 CHOLL AWAY
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: VASQUEZ, LEONARDO A
Address: 830 MACPHERSON PL.
City-St-Zip: WINTER GARDEN, FL 34787

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: LEONARDO VASQUEZ D 01/26/2006
Electronic Signature of Signing Officer or Director Date