

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005036

FILED
Feb 17, 2006
Secretary of State

Entity Name: GRACE ROAD CORPORATION

Current Principal Place of Business:

1219 BAYVIEW WAY
WELLINGTON, FL 33414

New Principal Place of Business:

11471 W SAMPLE RD
SUITE 11
CORAL SPRINGS, FL 33065

Current Mailing Address:

1219 BAYVIEW WAY
WELLINGTON, FL 33414

New Mailing Address:

11471 W SAMPLE RD
SUITE 11
CORAL SPRINGS, FL 33065

FEI Number: 65-0942625

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSZ FIU CORPORATION
200 SOUTH BISCAYNE BLVD, 20TH FLOOR
MIAMI, FL 331312310 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: D () Delete
Name: COY, JAMES H
Address: 2961 NW 53 TERRACE
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: COY, THERESA C
Address: 2961 NW 53 TERRACE
City-St-Zip: MARGATE, FL 33063

Title: D (X) Delete
Name: TAVILLA, PAUL
Address: 2961 NW 53 TERRACE
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COY, JAMES H
Address: 1219 BAYVIEW WAY
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Change () Addition
Name: COY, THERESA C
Address: 1219 BAYVIEW WAY
City-St-Zip: WELLINGTON, FL 33414

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: JAMES H COY

D

02/17/2006

Electronic Signature of Signing Officer or Director

Date