2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2009
Secretary of State

DOCUMENT# P01000015381

Entity Name: GRICE ENTERPRISES, INC.

Current Principal Place of Business:

1460 LAKE SHADOW CIRCLE
STE 7-307
MAITLAND, FL 32751

New Principal Place of Business:

585 SMOKEMONT CT
APOPKA, FL 32712

Current Mailing Address:

PO BOX 161542
ALTAMONTE SPRINGS, FL 32716

New Mailing Address:

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

Name and Address of Current Registered Agent:

GRICE, SANDRA
1460 LAKE SHADOW CIRCLE
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

GRICE, S
585 SMOKEMONT CT
APOPKA, FL 32712 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: SGRICE 05/30/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GRICE, SAMUEL
Address: 1460 LAKE SHADOW CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: VP ( ) Delete
Name: GRICE, SANDRA
Address: 1460 LAKE SHADOW CIRCLE
City-St-Zip: MAITLAND, FL 32715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GRICE, S
Address: 585 SMOKEMONT CT
City-St-Zip: APOPKA, FL 32712

Title: VP (X) Change ( ) Addition
Name: GRICE, S
Address: 585 SMOKEMONT CT
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SGRICE VP 05/30/2009
Electronic Signature of Signing Officer or Director Date