

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000012689

FILED
Aug 02, 2004
Secretary of State

Entity Name: GRACELAND ACADEMY INC.

Current Principal Place of Business:

1604 NORTH 44TH STREET
FORT PIERCE, FL 34947

New Principal Place of Business:

1220 DELAWARE AVENUE
FORT PIERCE, FL 34950

Current Mailing Address:

1604 NORTH 44TH STREET
FORT PIERCE, FL 34947

New Mailing Address:

FEI Number: 43-1950964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANT, VERONICA R
109 TROPIC COURT
FT. PIERCE, FL 34946

Name and Address of New Registered Agent:

GREEN, CASSANDRA M
1604 NORTH 44TH STREET
FORT PIERCE, FL 34947

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: CASSANDRA M GREEN

08/02/2004

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: PS () Delete
Name: GREEN, CASSANDRA
Address: 1604 NORTH 44TH STREET
City-St-Zip: FT. PIERCE, FL 34947

Title: T () Delete
Name: GREEN, RONALD
Address: 1604 NORTH 44TH STREET
City-St-Zip: FT. PIERCE, FL 34947

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GREEN, CASSANDRA M PRES
Address: 1604 NORTH 44TH STREET
City-St-Zip: FORT PIERCE, FL 34947

Title: V (X) Change () Addition
Name: GREEN, RONALD VP
Address: 1604 NORTH 44TH STREET
City-St-Zip: FT. PIERCE, FL 34947

Title: TS () Change (X) Addition
Name: MCPHEE-WINT, REGINA TS
Address: 310 NORTH 24TH STREET
City-St-Zip: FORT PIERCE, FL 34950

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CASSANDRA GREEN

P

08/02/2004

Electronic Signature of Signing Officer or Director

Date