

# 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000124058

1. Entity Name  
GRACE TITLE, INC.



Principal Place of Business  
117 HOLDERNESS DR  
LONGWOOD, FL 32779

Mailing Address  
117 HOLDERNESS DR  
LONGWOOD, FL 32779

FILED

05 OCT -4 AM 9: 53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



09272005 Chg-P CR2E034 (10/03)

2. Principal Place of Business

205 S. Westmonte Dr.  
Suite, Apt. #, etc.  
Ste. 2080

3. Mailing Address

Same  
Suite, Apt. #, etc.

City & State

Altamonte Springs FL

City & State

Altamonte Springs FL

Zip

32714

Country

USA

Zip

32714

Country

USA

4. FEI Number  
20-0375056

Applied For  
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CLARK, JAMES P  
117 HOLDERNESS DR  
LONGWOOD, FL 32779

7. Name and Address of New Registered Agent

Name

Same

Street Address (P.O. Box Number is Not Acceptable)

419 Curry Court

City

Altamonte Springs

FL

Zip Code

32714

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*James P. Clark*

James P. Clark President

9-28-05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate.)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.



\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CLARK, JAMES P  
117 HOLDERNESS DR  
LONGWOOD, FL 32779



Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

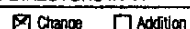
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President  
James P. Clark  
419 Curry Court  
Altamonte Springs FL 32714



Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President  
D. Greg Gary  
106 Cedaridge Lane  
Longwood FL 32779



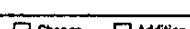
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
300060211269  
10/04/05--01045--001 \*\*\*70.00



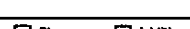
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AP 10/5



Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP



Change Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*James P. Clark*  
James P. Clark

9-28-05

Date

321-207-0465

Daytime Phone #