

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016309

FILED
Mar 15, 2010
Secretary of State

Entity Name: GRACE CLINIC CHRISTIAN COUNSELING, INC.

Current Principal Place of Business:

505 PARK AVE N STE 212
WINTER PARK, FL 32789

New Principal Place of Business:

505 PARK AVE N
STE 212
WINTER PARK, FL 32789

Current Mailing Address:

505 PARK AVE N STE 212
WINTER PARK, FL 32789

New Mailing Address:

505 PARK AVE N
STE 212
WINTER PARK, FL 32789

FEI Number: 34-1976664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAFFINDER, MONICA D VD
505 PARK AVE N STE 212
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

TAFFINDER, MONICA D VD
505 PARK AVE N
STE 212
WINTER PARK, FL 32789 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: MONICA TAFFINDER

03/15/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: YOUNG, BRADLEY R
Address: 13204 DEERFIELD CT.
City-St-Zip: LAKE OSWEGO, OR 97035

Title: VD
Name: TAFFINDER, MONICA D
Address: 630 DUNBAR STREET
City-St-Zip: WINTER PARK, FL 32789

Title: STD
Name: YOUNG, REBECCA L
Address: 13204 DEERFIELD CT.
City-St-Zip: LAKE OSWEGO, OR 97035

I hereby 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 all other like empowered.

SIGNATURE: MONICA TAFFINDER

VD

03/15/2010

Electronic Signature of Signing Officer or Director

Date