2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033145

Entity Name: AMAZING GRACE PROPERTY INC.

FILED Jan 31, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4657 FRANWOOD DR. 601 N. CONGRESS AVE DELRAY BEACH, FL 33445

420

DELRAY BEACH, FL 33445

Current Mailing Address: New Mailing Address:

4657 FRANWOOD DR 601 NORTH CONGRESS AVE DELRAY BEACH, FL 33445 420 DELRAY BEACH, FL 33445

FEI Number: 20-2468929 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ST. FORT, RIGAUD ST. FORT, RIGAUD 4657 FRANWOOD DR. 601 NORTH CONGRESS AVE DELRAY BEACH, FL 33445 US DELRAY BEACH, FL 33445

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: RIGAUD ST. FORT 01/31/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ST. FORT, RIGAUD ST. FORT, GERMY Name: Name: 4657 FRANWOOD DR. 4657 FRANWOOD DR. Address: Address: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip:

Title: Title: (X) Change () Addition () Delete

ST. FORT, MARIE Y. Name: Name: ST. FORT. MARIE Y. 4657 FRANWOOD DR 6675 AUDUBON TRAIL Address: Address: DELRAY BEACH, FL 33445 LAKE WORTH, FL 33467 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change (X) Addition

Name: ST. FORT, RIGAUD Name: 6675 AUDUBON TRAIL Address: Address: City-St-Zip: City-St-Zip: LAKE WORTH, FL 33467

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.

Ρ SIGNATURE: GERMY ST. FORT 01/31/2008