

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000010281

Entity Name: PATTY GRACE INC.

FILED
May 09, 2008
Secretary of State

Current Principal Place of Business:

6909 N BREVARD AVE
TAMPA, FL 33604

New Principal Place of Business:

5351 HARBORSIDE DR.
TAMPA, FL 33615

Current Mailing Address:

6909 N. BREVARD AVE
TAMPA, FL 33604

New Mailing Address:

5351 HARBORSIDE DR.
TAMPA, FL 33615

FEI Number: 20-4206682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRACE, PATRICIA
6909 N. BREVARD AVE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

GRACE, PATRICIA
5351 HARBORSIDE DR
TAMPA, FL 33615 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: PATRICIA GRACE

05/09/2008

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: GRACE, PATRICIA
Address: 6909 N. BREVARD AVE.
City-St-Zip: TAMPA, FL 33604 US

Title: VP () Delete
Name: GRACE, MICHAEL
Address: 6909 N. BREVARD AVE
City-St-Zip: TAMPA, FL 33604 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRACE, PATRICIA
Address: 5351 HARBORSIDE DR
City-St-Zip: TAMPA, FL 33615 US

Title: VP (X) Change () Addition
Name: GRACE, MICHAEL
Address: 5351 HARBORSIDE DR.
City-St-Zip: TAMPA, FL 33615 US

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: PATRICIA GRACE

PRES

05/09/2008

Electronic Signature of Signing Officer or Director

Date