

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000012711

**Entity Name:** HOLY CHURCH OF GRACE, INC.**Current Principal Place of Business:**2145 S MILITARY TRAIL  
WEST PALM BEACH, FL 33415**Current Mailing Address:**1233 45TH STREET  
SUITE A 7-8  
WEST PALM BEACH, FL 33407 US**FEI Number:** 42-1719046**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAMOUR, FRANTZ  
351 SANDPIPER AVE  
ROYAL PALM BEACH, FL 33411 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PRESIDENT AND PASTOR
Name	LAMOUR, FRANTZ
Address	351 SANDPIPER AVE
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	ASST.PASTOR
Name	MESADIEU, SONEL
Address	6717 3RD STREET
City-State-Zip:	JUPITER FL 33458

Title	CORRESPONDING SECRETARY
Name	LAMOUR, LINDA
Address	5319 MARCIA PLACE
City-State-Zip:	WEST PALM BEACH FL 33407

Title	DIRECTOR
Name	REMY, JUDE
Address	143 PARKWOOD DR
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	TREASURER
Name	GEFFRARD, AGENER
Address	5796 HAVERHILL ROAD
City-State-Zip:	WEST PALM BEACH FL 33407

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FRANTZ LAMOUR

PASTOR

06/07/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date