

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010218

Entity Name: THE GRACE MINISTRY OF HELPING HANDS, INC.

Current Principal Place of Business:

1620 NALDO AVENUE
JACKSONVILLE, FL 32207

Current Mailing Address:

1620 NALDO AVENUE
JACKSONVILLE, FL 32207 US

FEI Number: 30-0527092

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, ROY
8834 GOODBY'S EXECUTIVE DRIVE
JACKSONVILLE, FL 32217 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 P
Name MILLER, JAN
Address 8834 GOODBY'S EXECUTIVE DRIVE
City-State-Zip: JACKSONVILLE FL 32217

Title SECRETARY
Name DASHER, SHIRLEY
Address 8834 GOODBY'S EXECUTIVE DR
SUITE F
City-State-Zip: JACKSONVILLE FL 32217

Title VPPR
Name HARTLEY, RENE
Address 8834 GOODBY'S EXECUTIVE DRIVE
City-State-Zip: JACKSONVILLE FL 32217

Title VP
Name MCDANIEL, KATHLEEN
Address 8834 GOODBY'S EXECUTIVE DR.
City-State-Zip: JACKSONVILLE FL 32217

Title T
Name HARRELL, MONICA
Address 8834 GOODBY'S EXECUTIVE DR
SUITE F
City-State-Zip: JACKSONVILLE FL 32217

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: JAN MILLER

PRESIDENT

01/20/2015

Electronic Signature of Signing Officer/Director Detail

Date