

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006353

**Entity Name:** GRACE WORKS UNLIMITED INC.

**Current Principal Place of Business:**

24570 REDFISH ST.  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

24570 REDFISH ST.  
BONITA SPRINGS, FL 34134 US

**FEI Number:** 27-0604563

**Certificate of Status Desired:** No

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

BIDWELL, AUDRA  
24570 REDFISH ST.  
BONITA SPRINGS, FL 34134 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           TREASURER  
Name            BIDWELL, SUSAN  
Address         1912 EMPRESS COURT  
City-State-Zip: NAPLES FL 34110

Title            CHAIRMAN  
Name            FOY, HAROLD  
Address         P.O. BOX 101545  
City-State-Zip: CAPE CORAL FL 33910

Title            EXECUTIVE SECRETARY  
Name            HERLACHE, LISA  
Address         5715 26TH STREET WEST  
City-State-Zip: BRADENTON FL 34207

Title            DIRECTOR  
Name            ILER-BIDWELL, AUDRA  
Address         24570 REDFISH ST.  
City-State-Zip: BONITA SPRINGS FL 34134

*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:** AUDRA ILER-BIDWELL

**EXECUTIVE DIRECTOR**

**04/18/2016**

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

\_\_\_\_\_  
Date