

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000011431

**Entity Name:** GRACE LIFE OUTREACH, INC.

**Current Principal Place of Business:**

190 SEMINOLE LN APT 302  
COCOA BEACH, FL 32931

**Current Mailing Address:**

190 SEMINOLE LANE  
APT 302  
COCOA BEACH, FL 32931 US

**FEI Number:** 47-2559365

**Certificate of Status Desired:** Yes

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

IVANCHAK, MARC W JR  
190 SEMINOLE LANE  
#302  
COCOA BEACH, FL 32931 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/S  
Name IVANCHAK, MARC W JR  
Address 190 SEMINOLE LANE #302  
City-State-Zip: COCOA BEACH FL 32931

Title VP  
Name RIZZO, JAMES M  
Address 727 NASSAU ROAD  
City-State-Zip: COCOA BEACH FL 32931

Title T  
Name HUNT, CHARLOTTE R  
Address 680 CAMP ROAD  
City-State-Zip: COCOA FL 32927

Title DIRECTOR  
Name IVANCHAK, ELIZABETH ANN  
Address 190 SEMINOLE LANE  
APT 302  
City-State-Zip: COCOA BEACH FL 32931

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:** MARC W. IVANCHAK JR

**PRESIDENT**

**03/10/2017**

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

\_\_\_\_\_  
Date