

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000001758

Entity Name: WINNING GRACE, INC.**Current Principal Place of Business:**10299 SOUTHERN BLVD
UNIT 211598
ROYAL PALM BEACH, FL 33411**Current Mailing Address:**PO BOX 859
LOXAHATCHEE, FL 33470 US**FEI Number:** 47-3380959**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOLARIN, JOHN
10299 SOUTHERN BLVD
UNIT 211598
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	P
Name	SOLARIN, JOHN
Address	10299 SOUTHERN BLVD UNIT 211598
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	D
Name	ORIDOTA, TOLU
Address	14714 W. 83RD ST.
City-State-Zip:	LENEXA KS 66215

Title	SECRETARY
Name	MAURRASSE, NIKI
Address	184 BERENGER WALK
City-State-Zip:	ROYAL PALM BEACH FL 33414

Title	TREASURER
Name	MOREAU, SUZIE
Address	111 OCEAN CAY WAY
City-State-Zip:	HYPOLUXO FL 33462
Title	DIRECTOR
Name	MAURRASSE, SEBASTIEN
Address	184 BERENGER WALK
City-State-Zip:	ROYAL PALM BEACH FL 33414

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: SUZIE MOREAU**TREASURER****05/01/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date