

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 239719

**Entity Name:** GRACE & COMPANY, INCORPORATED

**Current Principal Place of Business:**

GRACE & COMPANY, INC.  
865 S LANE AVE  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

GRACE & COMPANY, INC.  
865 S LANE AVE  
JACKSONVILLE, FL 32205

**FEI Number:** 59-0906107

**Certificate of Status Desired:** No

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

LEE, ANNE G  
4816 AVON LANE  
JACKSONVILLE, FL 32210 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 C  
Name GRACE, ELROY C  
Address 4737 EXETER LANE  
City-State-Zip: JACKSONVILLE FL

Title VP  
Name GRACE, FORBES D  
Address 4338 COLONIAL AVENUE  
City-State-Zip: JACKSONVILLE FL

Title VP, SECRETARY  
Name GRACE, ROBERT B  
Address 7719 DEERWOOD POINT CT  
City-State-Zip: JACKSONVILLE FL

Title P  
Name LEE, ANNE G  
Address 4816 AVON LANE  
City-State-Zip: JACKSONVILLE FL

Title ASST. SECRETARY  
Name GRACE, JAUNELLE C  
Address 4637 LANCELOT LANE  
City-State-Zip: JACKSONVILLE FL 32210

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

**SIGNATURE:** ANNE G. LEE

**PRESIDENT**

**04/28/2016**

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

\_\_\_\_\_  
Date