2025 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2025
Secretary of State
1394377162CC

DOCUMENT# F19000003921

Entity Name: MOTHER OF DIVINE GRACE, INC.

Current Principal Place of Business:

407 BRYANT CIRCLE, STE C
OJAI, CA 93023

Current Mailing Address:

407 BRYANT CIRCLE, STE C
OJAI, CA 93023 US

FEI Number: 20-8607181

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HUMPHREY, MARY
344 SHETLAND DR
ST.JOHNS, FL 32259 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: MARY HUMPHREY 01/20/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CEO
Name	BERQUIST, LAURA
Address	407 BRYANT CIRCLE, STE C
City-State-Zip:	OJAI CA 93023

Title	D
Name	SCHUBERG, BETH
Address	407 BRYANT CIRCLE, STE C
City-State-Zip:	OJAI CA 93023

Title	D
Name	WALDSTEIN, FR. EDMUND
Address	407 BRYANT CIRCLE, STE C STE C
City-State-Zip:	OJAI CA 93023

Title	DIRECTOR
Name	JUSTIN , ALVAREZ
Address	407 BRYANT CIRLE SUITE C
City-State-Zip:	OJAI CA 93023

Title	DIRECTOR
Name	PETER , DELUCA
Address	407 BRYANT CIRCLE, STE C
City-State-Zip:	OJAI CA 93023

Title	D
Name	DOME, FR. THOMAS
Address	407 BRYANT CIRCLE, STE C
City-State-Zip:	OJAI CA 93023

Title	PRESIDENT
Name	LAZENBY, PAUL
Address	407 BRYANT CIRCLE, STE C
City-State-Zip:	OJAI CA 93023

Title	DIRECTOR
Name	MARK, MASTROIENI
Address	407 BRYANT CIRCLE SUITE C
City-State-Zip:	OJAI CA 93023

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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: BERNARD MICHAEL TREASURER 01/20/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WALSHE, FR. SEBASTIAN
Address	407 BRYANT CIRCLE STE C
City-State-Zip:	OJAI CA 93023

Title	TREASURER
Name	BERNARD, MICHAEL
Address	407 BRYANT CIRCLE SUITE C
City-State-Zip:	OJAI CA 93023

Title	SECRETARY
Name	MCALISTER, MARILYN
Address	407 BRYANT CIRCLE, STE C
City-State-Zip:	OJAI CA 93023