

**2017 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**



1. CORPORATION NAME  
GRACE REALTY CORPORATION

DUE DATE: 12/31/2017

SCC ID NO.: 0048793-4

2. VA REGISTERED AGENT NAME AND ADDRESS: OFFICER.

E. M. BERNSTEIN  
SUITE 306  
5206 MARKEL ROAD  
RICHMOND VA 23230

5. STOCK INFORMATION:

CLASS	AUTHORIZED
COMMON	3,000

SCC FOR ERM'S OFFICE  
CORPORATION DEPT  
2017 NOV 21 PM 1:09

3. CITY OR COUNTY OF VA REGISTERED OFFICE:  
216 - RICHMOND CITY

4. STATE OR COUNTRY OF INCORPORATION:  
VA - VIRGINIA

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

<input checked="" type="checkbox"/> Mark this box if address shown below is correct	If address is blank or incorrect, add or correct below.
ADDRESS: 5206 MARKEL RD #306	ADDRESS:
CITY/ST/ZIP: RICHMOND VA 23230	CITY/ST/ZIP:

7. DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed.  
An individual may be designated as both a director and an officer.

Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete Information	If information at lower left is incorrect or blank, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Replacement
NAME: E M BERNSTEIN TITLE: PRESIDENT ADDRESS: 100 RUNNING CEDAR LA CITY/ST/ZIP: RICHMOND VA 23229	NAME: Jason E. Bernstein TITLE: President/Secretary ADDRESS: 5206 Markel Road, Ste 306 CITY/ST/ZIP: Richmond, VA 23230

I affirm that the information contained in this report is accurate and complete as of the date below.

SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT

MARC BERNSTEIN, DIRECTOR 9/1/2017  
PRINTED NAME AND TITLE DATE

It is a Class 1 misdemeanor for any person to sign a document that is false in any material respect with intent that the document be delivered to the Commission for filing.

## 2017 ANNUAL REPORT CONTINUED

CORPORATE NAME:  
GRACE REALTY CORPORATION

DUE DATE: 12/31/2017  
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## 7. DIRECTORS AND PRINCIPAL OFFICERS (continued):

All directors and principal officers must be listed.  
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<p>OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> <p>NAME: <b>MARC BERNSTEIN</b></p> <p>TITLE: <b>DIRECTOR</b></p> <p>ADDRESS: <b>2319 FLOYD AVE</b></p> <p>CITY/ST/ZIP: <b>RICHMOND VA 23220</b></p>	<p>OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> <p>NAME: <b>Marc R. Bernstein</b></p> <p>TITLE: <b>Vice President/Treasurer</b></p> <p>ADDRESS: <b>5206 Markel Road, Ste 306</b></p> <p>CITY/ST/ZIP: <b>Richmond, VA 23230</b></p>
<p>Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete Information</p>	<p>If information at lower left is incorrect or blank, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement</p>
<p>OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> <p>NAME: <b>JASON E BERNSTEIN</b></p> <p>TITLE: <b>DIRECTOR</b></p> <p>ADDRESS: <b>8906 SIERRA ROAD</b></p> <p>CITY/ST/ZIP: <b>RICHMOND VA 23229</b></p>	<p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>
<p>Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete Information</p>	<p>If information at lower left is incorrect or blank, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement</p>
<p>OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> <p>NAME: <b>TERI COOPER</b></p> <p>TITLE: <b>DIRECTOR</b></p> <p>ADDRESS: <b>2204 THORNBURG DRIVE</b></p> <p>CITY/ST/ZIP: <b>RICHMOND VA 23233</b></p>	<p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>
<p>Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete Information</p>	<p>If information at lower left is incorrect or blank, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement</p>
<p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>	<p>OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> <p>NAME:</p> <p>TITLE:</p> <p>ADDRESS:</p> <p>CITY/ST/ZIP:</p>