## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## **FILED** Apr 23, 2007 08:00 All Secretary of State DOCUMENT # N97000005431 THE JANNITA D. MCGRIFF FOUNDATION, INC. Principal Place of Business Mailing Address 2905 LANGSTON DRIVE FORT PIERCE FL 34947 2905 LANGSTON DRIVE FORT PIERCE FL 34947 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 65-0789911 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired-Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SIMMONS, EVETT L Street Address (P.O. Box Number is Not Acceptable) 145 N.W. CENTRAL PARK PLAZA SUITE 200 PORT ST. LUCIE FL 34986 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITU. Delete TITLE Change Addition NAME JOHNSON, JIMMIE NAME U00000725155 STREET ADDRESS 3801 AVENUE J STREET ADDRESS 05/03/07-80011-002 61.25 CITY-ST-ZIP FORT PIERCE FL 34947 CITY-ST-ZIP HILE ☐ Defete DHE ☐ Change Addition NAMI. MCGRIFF, ROY NAME STREET ADDRESS 2326 SUTH CONWAY ROAD, APARTMENT F STREET ADORESS CITY-ST-ZIP ORLANDO FL 32812 CHY-SI-ZIP TITLE Delete Change Addition NAME MCGRIFF, BRENDA NAME. STREET ADDRESS 2905 LANGSTON DRIVE STREET ADDRESS CITY-SI-7IP CITY-S1-ZIP FORT PIERCE FL 34947 THE ☐ Delete Change ☐ Addition D NAME MCGRIFF, JANICE NAME STREET ADDRESS STREET ADDRESS 2905 LANGSTON DRIVE CITY - ST- 7(P CITY-ST-ZIP FORT PIERCE FL 34947 ШЦ ☐ Defete TITLE Change Addition NAME COLEMAN, H D STREET ADDRESS 312 NORTH 8TH STREET STREET ADDRESS CITY ST-7IP FORT PIERCE FL 34950 CHY-SI-ZIP TITLE ☐ Delete HHI Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP 12. I heroby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

777-461-0486

4-20-07