## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000005431

FILED Mar 31, 2009 Secretary of State

Entity Name: THE JANNITA D. MCGRIFF FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2905 LANGSTON DRIVE 2905 LANGSTON DRIVE FORT PIERCE, FL 34947 FORT PIERCE, FL 34946 **Current Mailing Address: New Mailing Address:** 2905 LANGSTON DRIVE 2905 LANGSTON DRIVE FORT PIERCE, FL 34947 FORT PIERCE, FL 34946 FEI Number: 65-0789911 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIMMONS, EVETT L 145 N.W. CENTRAL PARK PLAZA SUITE 200 PORT ST. LUCIE, FL 34986 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition JOHNSON, JIMMIE Name: Name: 3801 AVENUE J Address: Address: City-St-Zip: FORT PIERCE, FL 34947 City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition MCGRIFF, ROY Name: MCGRIFF, ROY Name: Address: 2326 SUTH CONWAY ROAD, APARTMENT F Address: 2326 SOUTH CONWAY ROAD, APARTMENT F City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812 Title: () Delete Title: (X) Change ( ) Addition MCGRIFF, BRENDA MCGRIFF, BRENDA Name: Name: 2905 LANGSTON DRIVE 2905 LANGSTON DRIVE Address: Address: City-St-Zip: FORT PIERCE, FL 34947 City-St-Zip: FORT PIERCE, FL 34946 Title: ( ) Delete Title: (X) Change ( ) Addition MCGRIFF, JANICE MCGRIFF, JANICE Name: Name: 2905 LANGSTON DRIVE 2905 LANGSTON DRIVE Address: Address: City-St-Zip: FORT PIERCE, FL 34947 City-St-Zip: FORT PIERCE, FL 34946 Title: () Delete Title: () Change () Addition COLEMAN, H D Name: Name: 312 NORTH 8TH STREET Address: Address: City-St-Zip: FORT PIERCE, FL 34950 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANICE MCGRIFF D 03/31/2009