

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005431

**FILED**  
**Feb 14, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

2905 LANGSTON DRIVE  
FORT PIERCE, FL 34946

**New Principal Place of Business:**

**Current Mailing Address:**

2905 LANGSTON DRIVE  
FORT PIERCE, FL 34946

**New Mailing Address:**

**FEI Number:** 65-0789911

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMMONS, EVETT L  
145 N.W. CENTRAL PARK PLAZA  
SUITE 200  
PORT ST. LUCIE, FL 34986 US

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

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:**

**Title:** D  
**Name:** JOHNSON, JIMMIE  
**Address:** 3801 AVENUE J  
**City-St-Zip:** FORT PIERCE, FL 34947

**Title:** D  
**Name:** MCGRIFF, ROY  
**Address:** 2326 SOUTH CONWAY ROAD, APARTMENT F  
**City-St-Zip:** ORLANDO, FL 32812

**Title:** D  
**Name:** MCGRIFF, BRENDA  
**Address:** 2905 LANGSTON DRIVE  
**City-St-Zip:** FORT PIERCE, FL 34946

**Title:** D  
**Name:** MCGRIFF, JANICE  
**Address:** 2905 LANGSTON DRIVE  
**City-St-Zip:** FORT PIERCE, FL 34946

**Title:** D  
**Name:** COLEMAN, H D  
**Address:** 312 NORTH 8TH STREET  
**City-St-Zip:** FORT PIERCE, FL 34950

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:** EVETT L SIMMONS

AGEN

02/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date