

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90331 037 ****61.25

DOCUMENT # 714131

1. Entity Name
THE HUNTER GRUBB FOUNDATION, INC.



Principal Place of Business
OLIVER HARRIS III PA
2518 SE WILLOUGHBY BLVD.
STUART, FL 34994

Mailing Address
OLIVER HARRIS III PA
2518 SE WILLOUGHBY BLVD.
STUART, FL 34994



04022004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-6202749

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, OLIVER III PA
2518 SE WILLOUGHBY BLVD.
STUART, FL 34994

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IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HANNUM, HUNTER G. 10 LAUREL HEIGHTS OLD LYME, CT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD HANNUM, HILDEGARDE 10 LAUREL HEIGHTS OLD LYME, CT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIFFIS, HUGHES (ESQ) 52 EUGENE O'NEILL DRIVE NEW LONDON, CT 06320
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FULWILER, CARL, M.D. 203 WALNUT ST. NEWTON, MA 02460
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HOLMES, LISA K 103 FERRY ROAD HADLYME, CT 06439
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hildegard K. Hannum 4/3/04 860 434-8425
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #