## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000008508

**Entity Name: G FOUNDATION CORPORATION** 

FILED Sep 10, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1600 S. FEDERAL HWY SUITE 915 POMPANO BEACH, FL 33062

**New Mailing Address: Current Mailing Address:** 

1600 S. FEDERAL HWY SUITE 915 POMPANO BEACH, FL 33062

FEI Number: 65-1062328 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:

GONYO, KENNETH D 1600 S. FEDERAL HWY SUITE 915 POMPANO BEACH, FL 33062

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:

City-St-Zip:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

() Delete WARTEN, FREDRICK Name: Address: 4531 NE 25TH AVENUE City-St-Zip: FORT LAUDERDALE, FL 33308

Title: () Delete WARTEN, FREDRICK Name: Address: 2456 NE 26TH ST

LIGHTHOUSE POINT, FL 33064 City-St-Zip:

Title: () Delete GONYO, KENNETH G Name: Address: 1600 S. FEDERAL HWY (915)

POMPANO BEACH, FL 33062

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition WARTEN, FREDRICK Name:

Address: 1600 S. FEDERAL HWY., STE. 915 City-St-Zip: POMPANO BEACH, FL 33062 US

(X) Change ( ) Addition Title:

Name: OLZEM, THOMAS B

Address: 1600 S. FEDERAL HWY., STE, 915 City-St-Zip: POMPANO BEACH, FL 33062 US

Title: (X) Change ( ) Addition

Name: GONYO, KENNETH D

1600 S. FEDERAL HWY., STE. 915 Address: City-St-Zip: POMPANO BEACH, FL 33062 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS B. OLZEM D 09/10/2004