

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005682

FILED
Jul 14, 2005
Secretary of State

Entity Name: GRAND HARBOR COMMUNITY OUTREACH PROGRAM, INC.

Current Principal Place of Business:

C/O MARGARET S. KELLER
5530 CAMINO REAL LN
VERO BEACH, FL 32967

New Principal Place of Business:

P.O. BOX 644017
VERO BEACH, FL 32964

Current Mailing Address:

C/O MARGARET S. KELLER
5530 CAMINO REAL LN
VERO BEACH, FL 32967

New Mailing Address:

P.O. BOX 644017
VERO BEACH, FL 32964

FEI Number: 51-0418002 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JUSTICE, MARLLYN S CPA.
635 17TH STREET
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

PORTER, THOMAS A
5620 N. HARBOR VILLAGE DR.
403
VERO BEACH, FL 32967 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: THOMAS A. PORTER

07/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KELLER, MARGARET S
Address: 5530 CAMINO REAL LN
City-St-Zip: VERO BEACH, FL 32967

Title: VPD () Delete
Name: SULLIVAN, WILLIAM
Address: 5470 CAMINO REAL LN
City-St-Zip: VERO BEACH, FL 32967

Title: RSD () Delete
Name: TURBIE, MARIE
Address: 1731 VICRORIA CIRCLE
City-St-Zip: VERO BEACH, FL 32967

Title: CSD (X) Delete
Name: DOOLEY, THOMAS
Address: 4814 WOOD DUCK CIRCLE
City-St-Zip: VERO BEACH, FL 32967

Title: TD (X) Delete
Name: BASKIN, RICHARD T
Address: 1749 VICTORIA CIRCLE
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MELNICK, ELIZABETH R
Address: P.O. BOX 644017
City-St-Zip: VERO BEACH, FL 32964

Title: V (X) Change () Addition
Name: THORPE, DAVID L
Address: P.O. BOX 644017
City-St-Zip: VERO BEACH, FL 32964

Title: T (X) Change () Addition
Name: PORTER, THOMAS A
Address: P.O. BOX 644017
City-St-Zip: VERO BEACH, FL 32964

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 A. PORTER

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07/14/2005

Electronic Signature of Signing Officer or Director

Date