## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N02000006490

FILED Jul 25, 2006 Secretary of State

Entity Name: VIRGINIA'S RAY OF LIGHT FOUNDATION, INC.

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

P.O. BOX 3475

WEST PALM BEACH, FL 33401

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

P.O. BOX 3475

WEST PALM BEACH, FL 33401

FEI Number: 51-0422708 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:

JONES FOSTER SERVICE, LLC 505 SOUTH FLAGLER DRIVE **SUITE 1100** WEST PALM BEACH, FL 33401 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition SILLS, VIRGINIA SILLS, VIRGINIA Name:

Name: 5719 SOUTH FLAGLER DRIVE Address: 5719 SOUTH FLAGLER DRIVE Address: City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: WEST PALM BEACH, FL 33405

Title: Title: (X) Change ( ) Addition ( ) Delete Name: DJAMIN, STEVE Name: DJAMIN, STEVE Address: 6039 MULLIN ST. Address: 6039 MULLIN ST.

City-St-Zip: JUPITER, FL 33458 City-St-Zip: JUPITER, FL 33458

Title: () Delete Title: DST (X) Change ( ) Addition SANDRIMAN-DJAMIN, JUDITH JENIFER Name: SANDRIMAN-DJAMIN, JUDITH JENIFER Name:

6039 MULLIN ST. Address: Address: 6039 MULLIN ST. City-St-Zip: JUPITER, FL 33458 City-St-Zip: JUPITER, FL 33458

( ) Change (X) Addition Title: () Delete Title: BOWDEN, C. WADE Name: Name: 505 S. FLAGER DRIVE, SUITE 1100 Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE DJAMIN VP 07/25/2006