

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009302

FILED
May 01, 2006
Secretary of State

Entity Name: CHRIS GRADY MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

2725 CENTER PLACE
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

2725 CENTER PLACE
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 20-0004634 **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:

HAGAN, KELLY
2725 CENTER PLACE
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

ROBIN, CRAMP
2725 CENTER PLACE
MELBOURNE, FL 32940 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: ROBIN CRAMP

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: GREENBLATT, HELLEN DR
Address: 2725 CENTER PLACE
City-St-Zip: MELBOURNE, FL 32940

Title: SP () Delete
Name: BENNETT, GINA
Address: 2725 CENTER PLACE
City-St-Zip: MELBOURNE, FL 32940

Title: T (X) Delete
Name: BROMM, HEIDI
Address: 2725 CENTER PLACE
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MGR (X) Change () Addition
Name: ROBIN, CRAMP
Address: 2725 CENTER PLACE
City-St-Zip: MELBOURNE, FL 32940

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 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: ROBIN CRAMP

MGR

05/01/2006

Electronic Signature of Signing Officer or Director

Date