## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005332

Entity Name: GRIND FOR LIFE, INC.

FILED Apr 26, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2023 N. ATLANTIC AVE #236 COCOA BEACH, FL 32931 **Current Mailing Address: New Mailing Address:** 2023 N. ATLANTIC AVE #236 COCOA BEACH, FL 32931 FEI Number: 81-0654128 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: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ROGERS, MICHAEL Name: Name: 2023 N. ATLANTIC AVE #236 Address: Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: Title: VST Title: ( ) Delete () Change () Addition GRESKO, JILL D Name: Name: Address: 2023 N. ATLANTIC AVE. #236 Address: City-St-Zip: COCOA BEACH, FL 32931 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition STEELE, JENNIFER STEELE, JENNIFER MRS Name: Name: Address: 641 EDDY ST Address: 641 EDDY ST City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487 Title: Title: D (X) Change ( ) Addition ( ) Delete MCCRANELS, SCOTT DR. Name: Name: GILICK, LLOYD MR Address: 220 ARKONA CT Address: 3731 NW 8TH AVE City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: BOCA RATON, FL 33431 Title: () Delete Title: ( ) Change (X) Addition LILLO, CHARLEY MR Name: Name: 12640 SW 7TH PLACE Address: Address: City-St-Zip: City-St-Zip: **DAVIE, FL 33325** Title: () Delete Title: ( ) Change (X) Addition SORGENTE, TAMI MRS Name: Name: Address: Address: 5719 LA GORCE CIRCLE LAKE WORTH, FL 33463 City-St-Zip: 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: JILL D GRESKO VST 04/26/2006