2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009800

Apr 20, 2007 Secretary of State

Entity Name: KEIRA GRACE FOUNDATION FOR CHILDREN'S CANCER, INC. **Current Principal Place of Business: New Principal Place of Business:** 8486 NW 64TH LANE GAINESVILLE, FL 32653 **Current Mailing Address: New Mailing Address:** 8486 NW 64TH LANE GAINESVILLE, FL 32653 FEI Number: 03-0572822 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAUZARDO, EILEEN F 8486 NW 64TH LANE GAINESVILLE, FL 32653 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: () Change () Addition () Delete LAUZARDO, EILEEN F Name: Name: Address: 8486 NW 64TH LANE Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: PD () Delete Title: () Change () Addition LAUZARDO, MICHAEL Name: Name: Address: 8486 NW 64TH LANE Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: VD () Delete Title: () Change () Addition HUNGER, STEPHEN Name: Name: Address: 1600 SW ARCHER ROAD Address: City-St-Zip: GAINESVILLE, FL 32610 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: EILEEN F. LAUZARDO STD 04/20/2007