

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009800

FILED  
Apr 13, 2012  
Secretary of State

**Entity Name:** KEIRA GRACE FOUNDATION FOR CHILDREN'S CANCER, INC.

**Current Principal Place of Business:**

8486 NW 64TH LANE  
GAINESVILLE, FL 32653

**New Principal Place of Business:**

**Current Mailing Address:**

8486 NW 64TH LANE  
GAINESVILLE, FL 32653

**New Mailing Address:**

**FEI Number:** 03-0572822

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAUZARDO, EILEEN F  
8486 NW 64TH LANE  
GAINESVILLE, FL 32653 US

**Name and Address of New Registered Agent:**

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:**

**Title:** STD  
**Name:** LAUZARDO, EILEEN F  
**Address:** 8486 NW 64TH LANE  
**City-St-Zip:** GAINESVILLE, FL 32653

**Title:** PD  
**Name:** LAUZARDO, MICHAEL  
**Address:** 8486 NW 64TH LANE  
**City-St-Zip:** GAINESVILLE, FL 32653

**Title:** VD  
**Name:** HUNGER, STEPHEN  
**Address:** 13123 EAST 16TH AVENUE, B115  
**City-St-Zip:** AURORA, CO 80045

I hereby 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 all other like empowered.

**SIGNATURE:** EILEEN F. LAUZARDO

STD

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date