

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010341

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: KREWE OF GRACE O'MALLEY FOUNDATION, INC.

**Current Principal Place of Business:**

3110 CORDELIA STREET  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

3110 CORDELIA STREET  
TAMPA, FL 33607

**New Mailing Address:**

FEI Number: 20-3663824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VALENTI, LORRAINE A  
1211 N WESTSHORE BLVD SUITE 414  
TAMPA, FL 336074605 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: DVT ( ) Delete  
Name: BARNUM, SUE  
Address: 1211 N WESTSHORE BLVD SUITE 414  
City-St-Zip: TAMPA, FL 336074605

Title: DV ( ) Delete  
Name: BURNETT, TERRY  
Address: 1211 N WESTSHORE BLVD SUITE 414  
City-St-Zip: TAMPA, FL 336074605

Title: DS ( ) Delete  
Name: RODRIGUEZ, DESIREE  
Address: 1211 N WESTSHORE BLVD SUITE 414  
City-St-Zip: TAMPA, FL 336074605

Title: DV ( ) Delete  
Name: WELLS, KAREN  
Address: 1211 N WESTSHORE BLVD SUITE 414  
City-St-Zip: TAMPA, FL 336074605

Title: DP (X) Delete  
Name: RODRIGUEZ, CAROL C  
Address: 3110 CORDELIA ST  
City-St-Zip: TAMPA, FL 33607

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DV (X) Change ( ) Addition  
Name: WELLS, KAREN  
Address: 1211 N WESTSHORE BLVD SUITE 414  
City-St-Zip: TAMPA, FL 336074605

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

Title: DP (X) Change ( ) Addition  
Name: RODRIGUEZ, CAROL  
Address: 1211 N WESTSHORE BLVD SUITE 414  
City-St-Zip: TAMPA, FL 336074605

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: CAROL C. RODRIGUEZ

DP

04/26/2006

Electronic Signature of Signing Officer or Director

Date