

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 12, 2009  
Secretary of State**

DOCUMENT# N07000006059

Entity Name: THE GRIGSBY FAMILY CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

747 SW 48TH AVE  
OKEECHOBEE, FL 34974

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1230  
OKEECHOBEE, FL 34973

**New Mailing Address:**

FEI Number: 26-0488199      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NOWICKI, MARK J ESQ  
480 MAPLEWOOD DRIVE STE 2  
JUPITER, FL 33458 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: D ( ) Delete  
Name: GRIGSBY, CAROLYN  
Address: 747 SW 48TH AVE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: D ( ) Delete  
Name: GRIGSBY, WILLIAM JR  
Address: 518 BEAR ROAD  
City-St-Zip: LAKE PLACID, FL 33852

Title: D ( ) Delete  
Name: BARTLETT, WILLIAM  
Address: PO BOX 967  
City-St-Zip: OKEECHOBEE, FL 34976

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: CAROLYN GRIGSBY

D

01/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date