

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2008 08:00 AM
Secretary of State

DOCUMENT # N24175

1. Entity Name
GREATON FAMILY FOUNDATION, INC.



Principal Place of Business
**%WILSON B. GREATON, JR.
4510 NORTHEAST 23 AVENUE
FT. LAUDERDALE, FL 33308**

Mailing Address
**%WILSON B. GREATON, JR.
4510 NORTHEAST 23 AVENUE
FT. LAUDERDALE, FL 33308**



02042008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0018498

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GREATON, WILSON B.
4510 NORTHEAST 23 AVENUE
FT. LAUDERDALE, FL 33308**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	GREATON, WILSON B.
STREET ADDRESS	4510 NORTHEAST 23 AVENUE
CITY-ST-ZIP	FT. LAUDERDALE, FL

TITLE	D
NAME	GREATON, ANTON D.
STREET ADDRESS	4510 NE 23 AVE.
CITY-ST-ZIP	FT. LAUDERDALE, FL

TITLE	VTD
NAME	STEPHANY, ELIZABETH G
STREET ADDRESS	2864 NE 24 ST.
CITY-ST-ZIP	FORT LAUDERDALE, FL 33305

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/21/08-80062-019 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/08

Date

954-561-0313

Daytime Phone #

Wilson B. Greaton, jr., President