

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 01, 2006 08:00 AM
Secretary of State**

DOCUMENT # N24450 1. Entity Name THE GREATER CONSTRUCTION CORP. CHARITABLE FOUNDATION, INC.	
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Principal Place of Business 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS, FL 32714 US	Mailing Address 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS, FL 32714 US
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01192006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2870807	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LOWNDES, JOHN F
215 NORTH EOLA DRIVE
ORLANDO, FL 32801**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MANDELL, ROBERT A 1105 KENSINGTON PARK DR. ALTAMONTE SPRINGS, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWNDES, JOHN F 215 NORTH EOLA DR. ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANDELL, LESTER 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS, FL 32714
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1110000451762
03/10/06-80067-010 61.25

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 officers empowered.

SIGNATURE:  **2/27/06** **407 8690300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #