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NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N29808 (5)

1. Corporation Name

THE H.E. GRAVES, JR. FAMILY FOUNDATION, INC.

Principal Place of Business	Mailing Address
C/O GULF STREAM LUMBER COMPANY 1415 SOUTH FEDERAL HWY BOYNTON BEACH FL 33435-6003	C/O GULF STREAM LUMBER COMPANY 1415 SOUTH FEDERAL HWY BOYNTON BEACH FL 33435-6003

3. Date Incorporated or Qualified: 12/20/1988

4. FEI Number: 65-0101433 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

VLASSIS, DENNIS K
1415 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH FL 33435-6003

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GRAVES, HAROLD E. JR. 1743 BROOKWOOD DR. AKRON OH	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	CD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRAVES, CAROLYN T. 1743 BROOKWOOD DR. AKRON OH	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VLASSIS, MARGOT GRAVES 8525 BONITA ISLE LAKE WORTH FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VLASSIS, DENNIS 8525 BONITA ISLE LAKE WORTH FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'NEILL, PAMELA, GRAVES 1825 FAIRLAWN KNOLLS AKRON OH	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VDS GRAVES, S KEITH 404 CRYSTAL LAKE RD AKRON OH	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	PSD	☒ Change ☐ Addition

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on any attachment with an address.

THE H.E. GRAVES, JR. FAMILY FOUNDATION, INC.

SIGNATURE: (X) H.E. Graves Jr. 1-30-98

1998 CORPORATION ANNUAL REPORT
THE H. E. GRAVES, JR. FAMILY FOUNDATION, INC.

Please add the following to #12:

D
GRAVES, MICHELE A.
404 CRYSTAL LAKE RD
AKRON OH

TD
O'NEILL, PATRICK L.
1825 FAIRLAWN KNOLLS
AKRON OH

D
GRAVES, R. SCOTT
56 RELAXED CIRCLE
HYPOLUXO FL