

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90188 032 ****70.00

DOCUMENT # N29808 1. Entity Name THE H.E. GRAVES, JR. FAMILY FOUNDATION, INC.	
--	---

Principal Place of Business C/O GULF STREAM LUMBER COMPANY 1481 W 15TH STREET RIVIERA BEACH, FL 33404	Mailing Address C/O GULF STREAM LUMBER COMPANY 1481 W 15TH STREET RIVIERA BEACH, FL 33404
--	--

50036369



2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address PO BOX 10448 Suite, Apt. #, etc.
---	---

02162005 Chg-NP CR2E037 (10/03)

City & State	City & State RIVIERA BCH FL
--------------	--------------------------------

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

Zip 33419-0448	Country US
-------------------	---------------

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
---	---

VLASSIS, DENNIS K 1481 W. 15TH ST. RIVIERA BEACH, FL 33404	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--	---

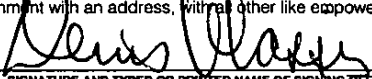
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
---	---	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VLASSIS, MARGOT GRAVES 6019 N OCEAN BLVD OCEAN RIDGE, FL 334355207 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VLASSIS, DENNIS 6019 N OCEAN BLVD OCEAN RIDGE, FL 334355207 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'NEILL, PAMELA, GRAVES 1246 DEARBORN DR AKRON, OH 443136722 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GRAVES, S KEITH 404 CRYSTAL LAKE RD AKRON, OH 443331712 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 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, without other like empowered.

SIGNATURE: 	DENNIS VLASSIS	2/16/05	(561) 472-9220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #