## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N29808

FILED Jan 14, 2008 Secretary of State

Entity Name: THE H.E. GRAVES, JR. FAMILY FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** C/O GULF STREAM LUMBER COMPANY C/O GULF STREAM BUILDERS SUPPLY **1481 W 15TH STREET** 1481 W 15TH STREET RIVIERA BEACH, FL 33404 RIVIERA BEACH, FL 33404 **Current Mailing Address: New Mailing Address:** P.O. BOX 10448 RIVIERA BEACH, FL 334190448 FEI Number: 65-0101433 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VLASSIS, DENNIS K 1481 W. 15TH ST. RIVIERA BEACH, FL 33404 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete VLASSIS, MARGOT GRAV, ES VLASSIS, MARGOT GRAV, ES Name: Name: 6019 N OCEAN BLVD Address: 4352 WAXWING COURT Address: City-St-Zip: OCEAN RIDGE, FL 334355207 City-St-Zip: BOYNTON BEACH, FL 33436 (X) Change ( ) Addition Title: VD () Delete Title: VLASSIS, DENNIS, Name: VLASSIS, DENNIS, Name: Address: 6019 N OCEAN BLVD Address: 4352 WAXWING COURT City-St-Zip: OCEAN RIDGE, FL 334355207 City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: () Change () Addition O'NEILL, PAMELA, GRA, VES Name: Name: 1246 DEARBORN DR Address: Address: City-St-Zip: AKRON, OH 443136722 City-St-Zip: Title: PSD () Delete Title: () Change () Addition Name: GRAVES, S KEITH, Name: Address: 404 CRYSTAL LAKE RD Address: City-St-Zip: AKRON, OH 443331712 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition GRAVES, MICHELE, Name: Name: 404 CRYSTAL LAKE RD. Address: Address: City-St-Zip: City-St-Zip: AKRON, OH 44333 Title: () Delete Title: ( ) Change (X) Addition O'NEILL, PATRICK L., Name: Name: Address: Address: 1246 DEARBORN DR. AKRON, OH 44313 City-St-Zip: 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: DENNIS VLASSIS VD 01/14/2008