

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36501

FILED
May 22, 2008
Secretary of State

Entity Name: GRAVES' DISEASE FOUNDATION, INC.

Current Principal Place of Business:

84 STREAMSIDE DRIVE
HENDERSONVILLE, NC 28791 US

New Principal Place of Business:

400 INTERNATIONAL DRIVE
WILLIAMSVILLE, NY 14221 US

Current Mailing Address:

P.O.BOX 1969
HENDERSONVILLE, NC 38791

New Mailing Address:

400 INTERNATIONAL DRIVE
WILLIAMSVILLE, NY 14221 US

FEI Number: 59-3009617 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PATETRSON, NANCY H
11647 SUMMERHAVEN BLVD NORTH
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

DONNER, DAVID
6099 PEACHTREE LANE
GREENACRES, FL 33463 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: DAVID DONNER

05/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PATTERSON, NANCY H
Address: 84 STREAMSIDE DRIVE
City-St-Zip: HENDERSONVILLE, NC 28791 US

Title: D () Delete
Name: RICE, LEE
Address: 11647 SUMMER HAVEN BLVD NORTH
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: MCCORD, CLINTON D JR
Address: 3200 DOWNWOOD CIRCLE
City-St-Zip: ATLANTA, GA

Title: D () Delete
Name: JONES, KATHY
Address: 11647 SUMMER HAVEN BLVD NORTH
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: BUCHER, ROBERT L
Address: 11647 SUMMER HAVEN BLVD NORTH
City-St-Zip: JACKSONVILLE, FL 32258

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: FILOCAMO, PETER DIR.
Address: 400 INTERNATIONAL DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: COB (X) Change () Addition
Name: PATTERSON, NANCY DIR.
Address: 400 INTERNATIONAL DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: CFO (X) Change () Addition
Name: FLYNN, STEVE DIR.
Address: 400 INTERNATIONAL DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: CMSO (X) Change () Addition
Name: SMITH, TERRY DIR.
Address: 400 INTERNATIONAL DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: SEC (X) Change () Addition
Name: DOSTART, PAUL DIR.
Address: 400 INTERNATIONAL DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: DIR () Change (X) Addition
Name: BELL-FLYNN, KATHLEEN
Address: 400 INTERNATIONAL DRIVE
City-St-Zip: WILLIAMSVILLE, NY 14221 US

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: PAUL J. DOSTART

SECR

05/22/2008

Electronic Signature of Signing Officer or Director

Date