

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N98000001520

Entity Name: GRANDMA'S PLACE, INC.

Current Principal Place of Business:

184 SPARROW DR
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

184 SPARROW DR
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 65-0821321 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

RAYMOND, JOHN J JR
BUTZEL LONG, P.C.
1200 NORTH FED. HWY., STE. 420
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: POOLE, MICHELE
Address: 4200 STATE ROAD 7
City-St-Zip: LAKE WORTH, FL 33449

Title: VP () Delete
Name: RUMSEY, KENDALL
Address: 315 HAWTHORNE DRIVE
City-St-Zip: LAKE PARK, FL 33403

Title: S/TR () Delete
Name: NORRIS, LINDA
Address: 111 PENBROKE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MICHELE M. POOLE

P

05/04/2009

Electronic Signature of Signing Officer or Director

_____ Date