

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000788

FILED
Apr 26, 2005
Secretary of State

Entity Name: GRANDPARENTS RAISING GRANDCHILDREN, INC.

Current Principal Place of Business:

160 J.F.K. DR., SUITE 201
ATLANTIS, FL 334626604

New Principal Place of Business:

160 JFK DRIVE
SUITE 201 &203
ATLANTIS, FL 33462

Current Mailing Address:

160 J.F.K. DR., SUITE 201
ATLANTIS, FL 334626604

New Mailing Address:

160 J.F.K. DRIVE
SUITE 201 & 203
ATLANTIS, FL 33462

FEI Number: 65-0984872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLAVECCHIO, FRANCIS R
160 J.F.K. DR., SUITE 201
ATLANTIS, FL 334626604 US

Name and Address of New Registered Agent:

COLAVECCHIO, FRANCIS R
160 J.F.K. DRIVE
SUITES 201 & 203
ATLANTIS, FL 33462 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: FRANCIS R. COLAVECCHIO

04/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLVAECCHIO, FRANCIS R
Address: 484 FORESTVIEW DR.
City-St-Zip: LAKE WORTH, FL 33462

Title: TS () Delete
Name: COLAVECCHIPO, JOAN G
Address: 4848 FORESTVIEW DR.
City-St-Zip: LAKE WORTH, FL 33462

Title: D () Delete
Name: MYCROFT, TERRY
Address: 160 JFK DR, SUITE 201
City-St-Zip: ATLANTIS, FL 33462

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 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 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: FRANCIS R. COLAVECCHIO

D

04/26/2005

Electronic Signature of Signing Officer or Director

Date