

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005795

FILED  
Apr 25, 2011  
Secretary of State

Entity Name: THE G2G FOUNDATION, INC.

**Current Principal Place of Business:**

12864 BISCAYNE BLVD.  
#127  
NORTH MIAMI, FL 33181 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 472515  
MIAMI, FL 332472515

**New Mailing Address:**

PO BOX 472515  
MIAMI, FL 332472515 US

FEI Number: 65-0954592

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEECH, STEPHEON  
412 NW 47TH ST.  
MIAMI, FL 33127 US

**Name and Address of New Registered Agent:**

WEECH, STEPHEON K DR.  
412 NW 47TH ST.  
MIAMI, FL 33127 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: DR. K. STEPHEON WEECH

04/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: WEECH, K. STEPHEON DR.  
Address: 412 NW 47TH ST.  
City-St-Zip: MIAMI, FL 33127 US

Title: V  
Name: PAGE, O'FERRELL  
Address: 1800 NE 187TH STREET  
City-St-Zip: MIAMI, FL 33179 US

Title: T  
Name: MCQUEEN, QUENTIN  
Address: 1070 NW 197TH TERRACE  
City-St-Zip: MIAMI, FL 33169 US

Title: S  
Name: BASTIAN, RYAN  
Address: 2286 NICOLE DR.  
City-St-Zip: HAMPTON, GA 330228 US

Title: D  
Name: MILLER, GEORGETTE R  
Address: 1800 NE 187TH STREET  
City-St-Zip: MIAMI, FL 33179

I hereby 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 all other like empowered.

SIGNATURE: K. STEPHEON WEECH

P

04/25/2011

Electronic Signature of Signing Officer or Director

Date