2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004089

Entity Name: GRAND FUND, INC.

FILED Jan 18, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

314 ARPIEKA AVE. 31 COMARES AVE.

ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080

Current Mailing Address: New Mailing Address:

314 ARPIEKA AVE. 31 COMARES AVE.

ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080

FEI Number: 75-3093993 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:

GRANDGEORGE, APRIL L BLACK, APRIL L 314 ARPIEKA AVE 31 COMARES AVE.

ST AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 32080 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: APRYL BLACK 01/18/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 GRANDGEORGE, APRIL L
 Name:
 BLACK, APRIL L

 Address:
 314 ARPIEKA AVE
 Address:
 31 COMARES AVE

 City-St-Zip:
 ST AUGUSTINE, FL 32080
 City-St-Zip:
 ST AUGUSTINE, FL 32080

 Name:
 GRANDGEORGE, APRIL L
 Name:
 BLACK, APRIL L

 Address:
 314 ARPIEKA AVE
 Address:
 31 COMARES

City-St-Zip: ST AUGUSTINE, FL 32080 City-St-Zip: ST AUGUSTINE, FL 32080

Title: T () Delete Title: T (X) Change () Addition

 Name:
 BLACK, COREY
 Name:
 BLACK, COREY

 Address:
 314 ARPIEKA AVENUE
 Address:
 31 COMARES AVE

 City-St-Zip:
 ST. AUGUSTINE, FL 32080
 City-St-Zip:
 ST. AUGUSTINE, FL 32080

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: APRYL BLACK P 01/18/2005