2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2012
Secretary of State

DOCUMENT# P14150

Entity Name: CLIFFORD AND LA VONNE GRAESE FOUNDATION, INCORPORATED

Current Principal Place of Business:

5193 FAIRWAY OAKS DR.
WINDERMERE, FL 34786 US

New Principal Place of Business:

Current Mailing Address:

5193 FAIRWAY OAKS DR.
WINDERMERE, FL 34786 US

New Mailing Address:

FEI Number: 13-3388411 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAESE, LAVONNE B
5193 FAIRWAY OAKS DR
WINDERMERE, FL 34786 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: PDT
Name: GRAESE, LAVONNE B.
Address: 5193 FAIRWAY OAKS DR
City-St-Zip: WINDERMERE, FL 34786

Title: D
Name: GRAESE, LA VONNE B.
Address: 5193 FAIRWAY OAKS DR
City-St-Zip: WINDERMERE, FL 34786

Title: VSD
Name: GRAESE, DIANE M
Address: 1704 CORDOBA CANYON ST
City-St-Zip: LAS VEGAS, NV 89117

Title: VDAT
Name: DAUGHERTY, SALLY
Address: 7005 NOBLETON DR
City-St-Zip: WINDERMERE, FL 34786

Title: VD
Name: ALFIREVIC, SUSAN
Address: 5518 SO PARK AVENUE
City-St-Zip: HINSDALE, IL 60521

Title: VD
Name: GRAESE, LARRY
Address: 11610 MURRAY AVENUE
City-St-Zip: LARGO, FL 34648

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: LAVONNE GRAESE PRES 03/02/2012

Electronic Signature of Signing Officer or Director Date