

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34323

FILED
Jan 27, 2005
Secretary of State

Entity Name: GRISWOLD SPECIAL CARE, INC.

Current Principal Place of Business:

717 BETHLEHEM PIKE
SUITE 300
ERDENHEIM, PA 19038 US

New Principal Place of Business:

Current Mailing Address:

717 BETHLEHEM PIKE
SUITE 300
ERDENHEIM, PA 19038 US

New Mailing Address:

FEI Number: 23-2506652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTHOF, SUE
12103 69TH AVENUE NORTH
SEMINOLE, FL 33772 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TDP () Delete
Name: GRISWOLD, KENT C MR.
Address: 1211 EAST BUTLER PIKE
City-St-Zip: AMBLER, PA 19002

Title: S () Delete
Name: GRISWOLD, LINCOLN T REV. DR
Address: 707 A BETHLEHEM PIKE
City-St-Zip: ERDENHEIM, PA 19038

Title: V () Delete
Name: GRISWOLD, LORI R DR.
Address: 1211 EAST BUTLER PIKE
City-St-Zip: AMBLER, PA 19002

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

SIGNATURE: KENT C. GRISWOLD

P

01/27/2005

Electronic Signature of Signing Officer or Director

_____ Date