## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39803

Entity Name: THE GRANT FOUNDATION, INC.

FILED Aug 07, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
1360 WHITFIELD AVENUE		7391 ELEANOR CIRCLE	
SARASOTA, FL 342431252		SARASOTA, FL 34243	
Current Mailing Address:		New Mailing Address:	
1360 WHITFIELD AVENUE		7391 ELEANOR CIRCLE	
SARASOTA, FL 342431252		SARASOTA, FL 34243	
FEI Number: 25-1017587 FEI Number Applied For ( ) FEI Num In accordance with s. 607.193(2)(b), F.S., the corporation did not receive to Name and Address of Current Registered Agent:		mber Not Applicable ( ) Certificate of Status Desired ( ) the prior notice.  Name and Address of New Registered Agent:	
ISAAC, HERTHA 7391 ELEANOR CIRCLE SARASOTA, FL 34243 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: Electronic Signature of Registered Agent			 Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	D ( ) Delete	Title:	D (X) Change ( ) Addition
Name:	BERGNER, RENEE M.D.	Name:	GRANT, JENIFER
Address:	134 PROSPECT PKWY.	Address:	17 MACK LANE
City-St-Zip:	BURLINGTON, VT 05401	City-St-Zip:	ESSEX, CT 06426
Title:	1VD () Delete	Title:	()Change ()Addition
Name:	GAUTIER, JACQUELINE M.D.	Name:	
Address:	PO BOX 1270	Address:	
City-St-Zip:	PORT-AU-PRINCE, HAITI,	City-St-Zip:	
Title:	D () Delete	Title:	TR (X) Change ( ) Addition
Name:	BRYANT, JOHN	Name:	SIMPSON, WILLIAM
Address:	97 FALLS BROOK LANE	Address:	3 MELLON BANK CENTER
City-St-Zip:	ATLANTA, GA 30305	City-St-Zip:	PITTSBURGH, PA 15217
Title:	PD () Delete	Title:	PD (X) Change ( ) Addition
Name:	WELLS, ROBERT E	Name:	RAWSON, IAN PHD
Address:	2530 PARKSIDE DRIVE	Address:	6401 DARLINTON ROAD
City-St-Zip:	ATLANTA, GA 30305	City-St-Zip:	PITTSBURGH, PA 15217
Title:	ATD ( ) Delete	Title:	()Change()Addition
Name:	BERQUIST, BRADLEY	Name:	
Address:	692 COURTLAND PLACE	Address:	
City-St-Zip:	BURLINGTON, ONTARIO, CN L7R 2M6	City-St-Zip:	
Title:	D ( ) Delete	Title:	( ) Change ( ) Addition
Name:	NORTHRUP, ROBERT M.D.	Name:	
Address:	307 W. GERMAN STREET	Address:	
City-St-Zip:	SHEPHERDSTOWN, WV 25443	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: IAN RAWSON PD 08/07/2006