2005 FOR PROFIT CORPORATION ANNUAL REPORT

MAY 03 2005

FILED
05 APR 29 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000040444

1. Entity Name
GRANTS ADMINISTRATION AND MANAGEMENT SERVICES, INC.

Principal Place of Business	Mailing Address
227 EAST JEFFERSON STREET QUINCY, FL 32351	227 EAST JEFFERSON STREET QUINCY, FL 32351

03112005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
114 North Madison St	3351 Hutchinson Ferry Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Quincy, FL	City & State: Quincy, FL
Zip: 32351 Country:	Zip: 32352 Country:

4. FEI Number 59-3439235 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RICHMOND, HAROLD S
227 EAST JEFFERSON STREET
QUINCY, FL 32351

7. Name and Address of New Registered Agent

Name: Rosemary C. Banks
Street Address (P.O. Box Number is Not Acceptable): 3351 Hutchinson Ferry Rd
City: Quincy FL Zip Code: 32352

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Rosemary C Banks, Rosemary C. Banks, 03/11/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUTLER, EDWARD J 406 US 27 SOUTH HAVANA, FL 32333	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 000054005930 05/06/05--01050--012 **158.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BANKS, ROSEMARY C 3351 HUTCHINSON FERRY RD QUINCY, FL 32351	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Quincy, FL 32352
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rosemary C. Banks, Rosemary C. Banks 03/11/05 (850)627-3119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #