

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **851325** (1)

1. Corporation Name  
**GRIFFIN INDUSTRIES, INC.**



Principal Place of Business  
**4221 ALEXANDRIA PIKE  
COLD SPRING KY 41076**

Mailing Address  
**4221 ALEXANDRIA PIKE  
COLD SPRING KY 41076**

3. Date Incorporated or Qualified **12/18/1981** 3a. Date of Last Report **05/22/1995**

4. FFI Number **61-0563430** Applied For Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business  
21 State, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 State, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's Board of Directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

**12. OFFICERS AND DIRECTORS**

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>GRIFFIN, DENNIS B</b>	
STREET ADDRESS	<b>4221 ALEXANDRIA PIKE</b>	
CITY, ST, ZIP	<b>COLD SPRING KY</b>	
TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>BLAIR, STEVEN D.</b>	
STREET ADDRESS	<b>4221 ALEXANDRIA PIKE</b>	
CITY, ST, ZIP	<b>COLD SPRING KY</b>	
TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>GRIFFIN, JOHN</b>	
STREET ADDRESS	<b>4221 ALEXANDRIA PIKE</b>	
CITY, ST, ZIP	<b>COLD SPRING KY</b>	
TITLE	<b>S</b>	<input type="checkbox"/> DELETE
NAME	<b>MERANUS, LEONARD S (ASST</b>	
STREET ADDRESS	<b>4221 ALEXANDRIA PIKE</b>	
CITY, ST, ZIP	<b>COLD SPRING KY</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>HOLT, DAVID L</b>	
STREET ADDRESS	<b>4221 ALEXANDRIA PIKE</b>	
CITY, ST, ZIP	<b>COLD SPRING KY</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is correctly furnished and does not qualify for the exemption state in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attached list with an address.

SIGNATURE: *Steven D Blair*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**STEVEN D BLAIR**

3/21/96  
606-701-2010  
DATE OF FILING  
3 26

CR2E034 (12/95)