

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Sep 22, 2009
Secretary of State**

DOCUMENT# 851325

Entity Name: GRIFFIN INDUSTRIES, INC.

Current Principal Place of Business:

4221 ALEXANDRIA PIKE
COLD SPRING, KY 41076

New Principal Place of Business:

Current Mailing Address:

4221 ALEXANDRIA PIKE
COLD SPRING, KY 41076

New Mailing Address:

FEI Number: 61-0563460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: GRIFFIN, ROBERT
Address: 4221 ALEXANDRIA PIKE
City-St-Zip: COLD SPRING, KY 41076

Title: T () Delete
Name: GRIFFIN, ANTHONY
Address: 4221 ALEXANDRIA PIKE
City-St-Zip: COLD SPRING, KY

Title: C () Delete
Name: GRIFFIN, JOHN
Address: 4221 ALEXANDRIA PIKE
City-St-Zip: COLD SPRING, KY 41076

Title: S () Delete
Name: SOLIMINE, LOUIS F
Address: 4221 ALEXANDRIA PIKE
City-St-Zip: COLD SPRING, KY 41076

Title: VP () Delete
Name: GRIFFIN, MARTIN W
Address: 4221 ALEXANDRIA PIKE
City-St-Zip: COLD SPRING, KY 41076

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:

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

SIGNATURE: ANTHONY GRIFFIN

T

09/22/2009

Electronic Signature of Signing Officer or Director

_____ Date