

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000114830

**Entity Name:** DAYTON-GRANGER, INC.

**Current Principal Place of Business:**

3299 SW 9TH AVE  
FT LAUDERDALE, FL 33315-3026

**Current Mailing Address:**

3299 SW 9TH AVE  
FT LAUDERDALE, FL 33315-3026

**FEI Number:** 59-1926443

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CLINE, GIBBONS D  
3299 SW 9TH AVE  
FT LAUDERDALE, FL 33315-3026 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

**Officer/Director Detail :**

Title           CHAIRMAN, TREASURER  
Name           CLINE, GIBBONS D  
Address        3299 SW 9TH AVE  
City-State-Zip: FT LAUDERDALE FL 33315-3026

Title           D/VP  
Name           CLINE, SIGRUN U  
Address        3299 SW 9TH AVE  
City-State-Zip: FORT LAUDERDALE FL 33315-3026

Title           DM  
Name           CLINE, GIBBONS DJR.  
Address        3299 SW 9TH AVE  
City-State-Zip: FORT LAUDERDALE FL 33315-3026

Title           PRESIDENT, SECRETARY  
Name           CLINE, KRISTIN K  
Address        3299 SW 9TH AVE  
City-State-Zip: FORT LAUDERDALE FL 33315-3026

*I hereby 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 all other like empowered.*

**SIGNATURE:** GIBBONS D CLINE

**CHAIRMAN**

**01/29/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date