

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 01, 2007 08:00 AM**  
**Secretary of State**

|                                                                             |                                                                                   |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # 227835</b><br>1. Entity Name<br><b>BEN HILL GRIFFIN, INC.</b> |  |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

|                                                                                   |                                                                  |
|-----------------------------------------------------------------------------------|------------------------------------------------------------------|
| Principal Place of Business<br><b>700 SCENIC HIGHWAY<br/>FROSTPROOF, FL 33843</b> | Mailing Address<br><b>P. O. BOX 127<br/>FROSTPROOF, FL 33843</b> |
|-----------------------------------------------------------------------------------|------------------------------------------------------------------|



01262007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

|                                                           |                                       |
|-----------------------------------------------------------|---------------------------------------|
| 4. FEI Number<br><b>59-0585518</b>                        | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

|                                                                                                                                |                                       |
|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| 6. Name and Address of Current Registered Agent<br><br><b>HURST, STEWART W<br/>700 SCENIC HIGHWAY<br/>FROSTPROOF, FL 33843</b> | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|

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 \_\_\_\_\_

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000614567  
02/06/07-80036-013 150.00

| 10. OFFICERS AND DIRECTORS                     |                                                                                |
|------------------------------------------------|--------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VT<br>HURST, STEWART W<br>335 SCENIC HWY<br>BABSON PARK, FL 33827              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>GRIFFIN, BEN HILL IV<br>1 BRACRES LANE<br>FROSTPROOF, FL 33843           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | CD<br>GRIFFIN, BEN HILL III<br>425 N. LAKE REEDY BLVD.<br>FROSTPROOF, FL 33843 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>HENDRY, LLOYD<br>14631 ORANGE RIVER RD<br>FORT MYERS, FL 33905            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>RESPRESS, DONNA H<br>801 CLINCH LAKE BLVD<br>FROSTPROOF, FL 33843         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VD<br>MOONEY, GENE<br>1139 S. LAKE REEDY BLVD<br>FROSTPROOF, FL 33843          |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Stewart W Hurst* (STEWART W HURST) 1/29/07 863-635-2251