

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 455575

FILED
Apr 20, 2009
Secretary of State

Entity Name: GRIFFIN FURNITURE COMPANY

Current Principal Place of Business:

101 S. ADAMS STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

101 S. ADAMS STREET
P O BOX 345
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-1536286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, RUBY T
516 W FRANKLIN ST
QUINCY, FL 32351 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRIFFIN, JAMES CARLTON
Address: 3866 LONGLEAF ROAD
City-St-Zip: TALLAHASSEE, FL

Title: V () Delete
Name: GRINER, LARRY D.
Address: STAR RT 1 BOX 1441
City-St-Zip: TALLAHASSEE, FL

Title: ST () Delete
Name: GRIFFIN, RUBY
Address: 516 W. FRANKLIN ST.
City-St-Zip: QUINCY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRIFFIN, JAMES CARLTON
Address: 3866 LONGLEAF ROAD
City-St-Zip: TALLAHASSEE, FL 32351

Title: V (X) Change () Addition
Name: GRINER, LARRY D.
Address: STAR RT 1 BOX 1441
City-St-Zip: TALLAHASSEE, FL 32351

Title: ST (X) Change () Addition
Name: GRIFFIN, RUBY
Address: 516 W. FRANKLIN ST.
City-St-Zip: QUINCY, FL 32351

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: JAMES C GRIFFIN

P

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date