

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 488868

FILED  
Mar 12, 2008  
Secretary of State

Entity Name: GRIMES REAL ESTATE SERVICES, INC.

**Current Principal Place of Business:**

921 W. OAKLAND AVE  
OAKLAND, FL US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 783037  
WINTER GARDEN, FL 347783037

**New Mailing Address:**

FEI Number: 59-1710367      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GRIMES, SAUL P  
880 TILDENVILLE SCHOOL RD  
WINTER GARDEN, FL 34787 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: GRIMES, SAUL P  
Address: 880 TILDENVILLE SCHOOL RD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: ST ( ) Delete  
Name: GRIMES, ANN M  
Address: 880 TILDENVILLE SCHOOL RD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: V ( ) Delete  
Name: PARMER, MELANIE  
Address: 413 MARY ELLEN CT  
City-St-Zip: WINTER GARDEN, FL 34787

**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:

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: SAUL GRIMES

P

03/12/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date