FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 28 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **595933** **(3)**

1. Corporation Name

GRIFFIN INVESTMENTS, INC.

Principal Place of Business	Mailing Address
4090 COUNTY RD. 78-WEST LABELLE FL 33935	4090 COUNTY RD. 78-WEST LABELLE FL 33935

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/01/1978
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business
21: 322 N.E. 19th St.
22: Suite, Apt. #, etc.
23: City & State: Cape Coral, Fl
24: Zip: 33909 25: Country:

2a. Mailing Address
26: 322 N.E. 19th St.
27: Suite, Apt. #, etc.
28: City & State: Cape Coral, Fl.
29: Zip: 33909 30: Country:

4. FEI Number: 59-2241801 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GUARD, JOHN E
~~4090 COUNTY RD. 78-WEST~~
~~LABELLE FL 33935~~

10. Name and Address of New Registered Agent

81 Name: Guard, John E.
82 Street Address (P.O. Box Number is Not Acceptable): 322 N.E. 19th St.
83:
84 City: Cape Coral, Fl FL 85 Zip Code: 33909

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: John E. Guard JOHN E. GUARD DATE: 4/19/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	11 TITLE	☐ Change ☐ Addition
NAME	RENZ, JANA GUARD	12 NAME	
STREET ADDRESS	2441 LIMPKIN LANE	13 STREET ADDRESS	
CITY-ST-ZIP	ALVA, FL 33920	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	GUARD, PAUL P	22 NAME	
STREET ADDRESS	3327 SE 18TH AVE.	23 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	24 CITY-ST-ZIP	P/D
TITLE	PD	31 TITLE	☒ Change ☐ Addition
NAME	GUARD, JOHN E	32 NAME	Guard John E.
STREET ADDRESS	~~4090 COUNTY RD. 78-WEST~~	33 STREET ADDRESS	322 N.E. 19th St.
CITY-ST-ZIP	LABELLE FL	34 CITY-ST-ZIP	Cape Coral, Fl. 33909
TITLE	VD	41 TITLE	V/D ☒ Change ☐ Addition
NAME	GUARD, KENNETH E	42 NAME	Guard, Kenneth E.
STREET ADDRESS	~~15730 COUNTRY CT, S.E.~~	43 STREET ADDRESS	6238 Presidential Ct. 4A
CITY-ST-ZIP	FT.MYERS FL	44 CITY-ST-ZIP	Ft. Myers, Fl. 33919
TITLE	STD	51 TITLE	S/T/D ☒ Change ☐ Addition
NAME	GUARD, IRENE C	52 NAME	Guard, Irene C.
STREET ADDRESS	~~4090 COUNTY RD. 78-WEST~~	53 STREET ADDRESS	322 N.E. 19th St.
CITY-ST-ZIP	~~LABELLE FL~~	54 CITY-ST-ZIP	Cape Coral, Fl. 33909
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John E. Guard JOHN E. GUARD P/D 4/19/95 813-574-3443
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0234178 CP