

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90185 017 ***150.00

14001004



04222005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1961555

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GRIFFIN, GERALD S
37545 CR 54 W
ZEPHYRHILLS, FL 33541

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GRIFFIN, GERALD SR. 37545 CR 54 W ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GRIFFIN, RUBY 37545 CR 54 W ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GRIFFIN, GERALD R. POST OFFICE BOX 72 ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GRIFFIN, HAROLD S 37045 PEPPER DR ZEPHYRHILLS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Gerald A. Griffin Jr. GERALD A. GRIFFIN JR. 4/26/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #