

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 650475

Entity Name: GRIFFIS TILE CO., INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

14 ALMOND DR RUN
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

14 ALMOND DR RUN
OCALA, FL 34472

New Mailing Address:

FEI Number: 59-1960753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIS, ORRIN
7335 CHERRY PASS
OCALA, FL 34472 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: D () Delete
Name: GRIFFIS, DELMUS O
Address: 1719 EVANGELINE AVE.
City-St-Zip: SEBRING, FL 338702939

Title: D () Delete
Name: GRIFFIS, HAZEL C
Address: 1719 EVANGELINE AVE.
City-St-Zip: SEBRING, FL 338702939

Title: PD () Delete
Name: GRIFFIS, DOUGLAS
Address: 1438 SE 38TH COURT
City-St-Zip: OCALA, FL 34471

Title: STD () Delete
Name: GRIFFIS, ORRIN C
Address: 7335 CHERRY PASS
City-St-Zip: OCALA, FL 34472

Title: DV () Delete
Name: GRIFFIS, WARREN V
Address: PO BOX 264
City-St-Zip: SUMMERFIELD, FL 34421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRIFFIS, DELMUS O
Address: 4610 SE 14TH ST
City-St-Zip: OCALA, FL 34471

Title: D (X) Change () Addition
Name: GRIFFIS, HAZEL C
Address: 4610 SE 14TH ST
City-St-Zip: OCALA, FL 34471

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: ORRIN C GRIFFIS

SEC/

04/21/2009

Electronic Signature of Signing Officer or Director

Date