

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 838172

1. Entity Name

RAY GRIFFIN ASSOCIATES, INC.

FILED
Feb 10, 2000 8:00 am
Secretary of State

02-10-2000 90033 043 ***150.00

Principal Place of Business

515 E. LAS OLAS BLVD.
SUITE 930
FT LAUDERDALE FL 33301
US

Mailing Address

PO BOX 8907
FT LAUDERDALE FL 33310-8907
US

2. Principal Place of Business

11 SW 15 STREET

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE FL

City & State

Zip

33316

Country

U.S.

Zip

Country

4. FEI Number

71-0404299

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KLISTON, TODD W., ESQ.
8211 W. BROWARD BLVD.
SUITE 375
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DC
GRIFFIN, RAY
15 N VICTORIA PARK ROAD
FT LAUDERDALE FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
GRIFFIN, PATSY A
515 EAST LAS OLAS BLVD #930
FORT LAUDERDALE FL 33301

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
15 N VICTORIA PARK ROAD
FT. LAUDERDALE, FL 33301

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
ST
KNOPP, LINDA A
515 EAST LAS OLAS BLVD #930
FORT LAUDERDALE FL 33301

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
796 TANGLEWOOD CIRCLE
WILSON, FL 33327

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)