

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F00000006019

1. Entity Name
ST. FRANCIS INVESTMENTS, INC.



Principal Place of Business
**2727 S.W. 22ND AVENUE
MIAMI, FL 33133**

Mailing Address
**2727 S.W. 22ND AVENUE
MIAMI, FL 33133**



01312006 No Chg-P CR2E034 (11/05)

4. FEI Number
58-2572207

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

**STEVERNE, JOHN
2727 S.W. 22ND AVENUE
MIAMI, FL 33133**

**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

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

(NOTE: Registered Agent signature required when re/instating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CANTRELL, KENNETH R
STREET ADDRESS	300 WEST FIRST STREET
CITY- ST- ZIP	TUSCUMBIA, AL 35674
TITLE	ST
NAME	GRILLO, A A
STREET ADDRESS	2727 S.W. 22ND AVENUE
CITY- ST- ZIP	MIAMI, FL 33133
TITLE	D
NAME	GRILLO, NADINE P
STREET ADDRESS	2727 S.W. 22ND AVENUE
CITY- ST- ZIP	MIAMI, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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02/13/06-80083-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Ad Grillo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/06

Date

305 857 6695

Daytime Phone #