

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004644

FILED
Mar 23, 2009
Secretary of State

Entity Name: GRINDLINE SKATEPARKS, INC.

Current Principal Place of Business:

4619 14TH AVE SW
SEATTLE, WA 98106

New Principal Place of Business:

Current Mailing Address:

4619 14TH AVE SW
SEATTLE, WA 98106

New Mailing Address:

FEI Number: 75-3041527

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, EDWARD G
1225 GLEN ROYAL TERRACE
DELAND, FL 32720 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: CEO () Delete
Name: HUBBARD, ROGER M
Address: 4619 14TH AVE SW
City-St-Zip: SEATTLE, WA 98106

Title: D () Delete
Name: GIAQUINTA, EMILY G
Address: 4122 44TH AVE SW
City-St-Zip: SEATTLE, WA 98116

Title: CFO (X) Delete
Name: GIAQUINTA, EMILY G
Address: 4122 44TH AVE SW
City-St-Zip: SEATTLE, WA 98116

Title: D () Delete
Name: VINCENT, ROBERT D
Address: 4056 23RD AVE SW
City-St-Zip: SEATTLE, WA 98106

Title: COO () Delete
Name: FLUEGGE, MATHEW BRETT
Address: 1470 ST. HILAIRE RD
City-St-Zip: YAKIMA, WA 98901

Title: D () Delete
Name: PALMER, DAVID LENT
Address: 3913 SE 71 AVE
City-St-Zip: PORTLAND, OR 97206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: GIAQUINTA, EMILY G
Address: 4122 44TH AVE SW
City-St-Zip: SEATTLE, WA 98116

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EMILY GIAQUINTA

CFO

03/23/2009

Electronic Signature of Signing Officer or Director

Date