

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004644

FILED  
Mar 01, 2010  
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 (X)

**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  
Name: HUBBARD, ROGER M  
Address: 4619 14TH AVE SW  
City-St-Zip: SEATTLE, WA 98106

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: EMILY GIAQUINTA

CFO

03/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date