

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002165

FILED
Jan 26, 2005
Secretary of State

Entity Name: GRELL ENTERPRISES, INC.

Current Principal Place of Business:

3249 NEWGATE CT
DUBLIN, OH 43017

New Principal Place of Business:

Current Mailing Address:

3249 NEWGATE CT
DUBLIN, OH 43017

New Mailing Address:

FEI Number: 31-1460033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHIPP, JANICE
1117 MASSACHUSETTS AVE.
ST. CLOUD, FL 34769 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: VVC () Delete
Name: GREEN, ROBERT P
Address: 5505 HAZELWOOD RD.
City-St-Zip: COLUMBUS, OH 43229

Title: TD () Delete
Name: GREEN, EVELYN L
Address: 5505 HAZELWOOD RD.
City-St-Zip: COLUMBUS, OH 43229

Title: PC () Delete
Name: ELLINGSWORTH, PAUL C
Address: 3249 NEWGATE CT
City-St-Zip: DUBLIN, OH 43017

Title: SD () Delete
Name: ELLINGSWORTH, VIRGINIA J
Address: 3240 NEWGATE CT
City-St-Zip: DUBLIN, OH 43017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: PAUL C ELLINGSWORTH

PC

01/26/2005

Electronic Signature of Signing Officer or Director

_____ Date