## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H43076

DANIEL GRIFFITH LOGGING, INC.

Principal	Place	οί	Business

1 N 1 N

Mailing Address

## **FILED** Apr 29 1998 8:00am Secretary of State



1420 HWY 297-A 1420 HWY 297-A **CANTONMENT FL 32533 CANTONMENT FL 32533** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1985 2. Principa! Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2582986 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes □ No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **GRIFFITH. DANIEL C** 81 1420 HIGHWAY 297A 82 Street Address (P.O. Box Number is Not Acceptable) CANTONMENT FL 32533 вз 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or pentert name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change GRIFFITH, DANIEL C 1.2 NAME 1420 HIGHWAY 297A STREET ADDRESS 1.3 STREET ADDRESS **CANTONMENT FL 32533** CITY-ST-ZIP 1.4 CITY-ST-ZiP DELETE TITLE Change 21 TITLE Addition ANTHONY, RONALD K NAME 22 NAME 111 W. KINGSFIELD ROAD STREET ADDRESS 2.3 STREET ADDRESS **CANTONMENT FL 32533** CITY-ST-ZIP 2.4 CITY-ST-7IP DELETE TITLE 3.1 TITLE ☐ Change Addition **BROWN, JAMES B** NAME 3.2 NAME 4062 BURFORD LANE STREET ADDRESS 3.3 STREET ADDRESS MILTON FL 32583 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DFLETE Change 4.1 TITLE Addition PIERSON, KENNETH NAME 4. 2 NAME 1775 HWY 95A N STREET ADDRESS 4.3 STREET ADDRESS **CANTONMENT FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed or on an attachment with an