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Mar 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H63317 (2)

1. Corporation Name
GRIFFIS, INC.

Principal Place of Business

6641 103 ST
6641 103RD ST.
JACKSONVILLE FL 32210
US

Mailing Address

6641 103 ST
6641 103RD ST.
JACKSONVILLE FL 32210-7133
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

06/24/1985

3a. Date of Last Report

04/05/1986

4. FEI Number

59-2543818

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GRIFFIS, HENRY G JR
6641 103RD ST.
JACKSONVILLE FL 32210

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 type: (For printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC
NAME GRIFFIS, HENRY G., SR.
STREET ADDRESS 6641 103RD ST
CITY-ST-ZIP JACKSONVILLE FL

TITLE D
NAME GRIFFIS, IDA L.
STREET ADDRESS 6641 103RD ST
CITY-ST-ZIP JACKSONVILLE FL

TITLE DP
NAME GRIFFIS, HENRY G., JR.
STREET ADDRESS 6641 103RD ST
CITY-ST-ZIP JACKSONVILLE FL

TITLE ST
NAME CUNNINGHAM, SHARON
STREET ADDRESS 6641 103RD STREET
CITY-ST-ZIP JACKSONVILLE FL

TITLE AS
NAME MOSLEY, DIANA
STREET ADDRESS 6641 103RD STREET
CITY-ST-ZIP JACKSONVILLE FL

TITLE AT
NAME TATE, WILLIAM
STREET ADDRESS 6641 103RD ST
CITY-ST-ZIP JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William Tate*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/97

9044771+340

Date Day:me Time #

CR2E034 (9/96)