

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000036494

Entity Name: GRIFFIS ASSETS, LLC

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4251 SE 44TH LANE  
GULF HAMMOCK, FL 32639

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 226  
GULF HAMMOCK, FL 32639

**New Mailing Address:**

FEI Number: 27-3169419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRIFFIS, CHAD M  
4251 SE 44TH LANE  
GULF HAMMOCK, FL 32639 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GRIFFIS, CHAD M  
Address: 4251 SE 44TH LANE  
City-St-Zip: GULF HAMMOCK, FL 32639

Title: MGR  
Name: GRIFFIS, VICTOR  
Address: 4251 SE 44TH LANE  
City-St-Zip: GULF HAMMOCK, FL 32639

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHAD M. GRIFFIS

MGR

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date