

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

1. Entity Name
GRIFFIN MARINE ASSOCIATES INC.



Principal Place of Business
4291 PINE ISLAND RD
P.O. BOX 681
MATLACHA, FL 33909

Mailing Address
4291 PINE ISLAND RD
P.O. BOX 681
MATLACHA, FL 33909



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4. FEI Number
65-0142562

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 00000000
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6. Name and Address of Current Registered Agent

BRUEHL, TIMOTHY J
5400 PINE ISLAND RD
SUITE D
BOKEELIA, FL 33922

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 000000
0000000000

U000000129314
04/26/04-80097-010 150.00

10. OFFICERS AND DIRECTORS

TITLE PS
NAME CASEY, MAUREEN
STREET ADDRESS P.O. BOX 681/4291 PINE ISLAND ROAD
CITY-ST-ZIP MATLACHA, FL

TITLE VPT
NAME SCHOLL, THERESA
STREET ADDRESS P.O. BOX 681/4291 PINE ISLAND RD
CITY-ST-ZIP MATLACHA, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Maureen Casey MAUREEN CASEY April 21 2004 239 2830680
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR