

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L51812

FILED  
Apr 13, 2010  
Secretary of State

Entity Name: LYNN J. GRIFFITH, P.A.

**Current Principal Place of Business:**

% LYNN J. GRIFFITH, P.A.  
6338 PRESIDENTIAL CT., SUITE 101  
FT. MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

% LYNN J. GRIFFITH, P.A.  
6338 PRESIDENTIAL CT., SUITE 101  
FT. MYERS, FL 33919

**New Mailing Address:**

FEI Number: 65-0179651

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRIFFITH, LYNN J  
6338 PRESIDENTIAL CT  
STE. 101  
FT MYERS, FL 33919 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: PST  
Name: GRIFFITH, LYNN J.  
Address: 6338 PRESIDENTIAL CT, STE. 101  
City-St-Zip: FT MYERS, FL 33919

Title: D  
Name: GRIFFITH, LYNN J.  
Address: 6338 PRESIDENTIAL CT, STE. 101  
City-St-Zip: FT MYERS, FL 33919

I hereby 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 all other like empowered.

SIGNATURE: LYNN J. GRIFFITH

PRES

04/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date