

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L86357

1. Entity Name.

FRANK GRIFFIN CONSTRUCTION, INC.

FILED

Feb 03, 2001 8:00 am
Secretary of State

02-03-2001 90054 020 ***150.00

Principal Place of Business

C/O LILLIAN H. GRIFFIN
P O BOX 950508, 114 LONGWOOD LK MARY RD
LAKE MARY FL 32795-0508
US

Mailing Address

C/O LILLIAN H. GRIFFIN
P.O. BOX 950508, 114 LONGWOOD LK MARY RD
LAKE MARY FL 32795-0508
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3044118

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRIFFIN, LILLIAN H.
114 LONGWOOD-LAKE MARY ROAD
LAKE MARY FL 32795

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME GRIFFIN, LILLIAN
STREET ADDRESS P.O. BOX 950508 N/A
CITY-ST-ZIP LAKE MARY FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE STD
NAME LOHR, LORRAINE
STREET ADDRESS P.O. BOX 950508 N/A
CITY-ST-ZIP LAKE MARY FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE VT
NAME GRIFFIN, W. FRANK JR.
STREET ADDRESS P.O. BOX 950508 N/A
CITY-ST-ZIP LAKE MARY FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE VS
NAME GRIFFIN, JAMES R.
STREET ADDRESS P.O. BOX 950508 N/A
CITY-ST-ZIP LAKE MARY FL ☒ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lorraine G. Lohr *Lorraine G. Lohr*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 29, 2001/407 322-2154

Date Daytime Phone #

CR2E034 (10/00)