2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006
Secretary of State

DOCUMENT# L86357

Entity Name: FRANK GRIFFIN CONSTRUCTION, INC.

Current Principal Place of Business:

C/O LILLIAN H. GRIFFIN
P O BOX 950508, 114 LONGWOOD LK MARY RD
LAKE MARY, FL 327950508 US

New Principal Place of Business:

Current Mailing Address:

C/O LILLIAN H. GRIFFIN
P O BOX 950508, 114 LONGWOOD LK MARY RD
LAKE MARY, FL 327950508 US

New Mailing Address:

FEI Number: 59-3044118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

GRIFFIN, LILLIAN H.
114 LONGWOOD-LAKE MARY ROAD
LAKE MARY, FL 32746 US

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: 02/02/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GRIFFIN, LILLIAN,
Address: P.O. BOX 950508 N/A
City-St-Zip: LAKE MARY, FL

Title: STD ( ) Delete
Name: LOHR, LORRAINE,
Address: P.O. BOX 950508 N/A
City-St-Zip: LAKE MARY, FL

Title: VT ( ) Delete
Name: GRIFFIN, W. FRANK JR, .
Address: P.O. BOX 950508 N/A
City-St-Zip: LAKE MARY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LORRAINE LOHR STD 02/02/2006
Electronic Signature of Signing Officer or Director — Date