

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 30, 2004 8:00 am
Secretary of State

08-30-2004 90139 050 ****50.00

DOCUMENT # M98000000292



1. Entity Name
GRIFFIN L.L.C. VALDOSTA, GEORGIA

Principal Place of Business
2509 ROCKY FORD ROAD
VALDOSTA, GA 31609-1

Mailing Address
2509 ROCKY FORD ROAD
VALDOSTA, GA 31609-1

24082090



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08172004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number

58-2380853

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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. 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 reinstating)

DATE

Filing Fee is \$50.00
Due by September 8, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☒ Delete
NAME GRIFFIN, R A JR
STREET ADDRESS 2509 ROCKY FORD ROAD
CITY-ST-ZIP VALDOSTA, GA 316091

TITLE MGR ☒ Delete
NAME CAMPBELL, J. JETTE
STREET ADDRESS 2509 ROCKY FORD ROAD
CITY-ST-ZIP VALDOSTA, GA 316091

TITLE MGR ☒ Delete
NAME MCTIER, JOHN T
STREET ADDRESS 2509 ROCKY FORD ROAD
CITY-ST-ZIP VALDOSTA, GA 316091

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☐ Change ☒ Addition
NAME James C. Borel
STREET ADDRESS 1007 N. Market Street
CITY-ST-ZIP Wilmington DE 19898

TITLE MGR ☐ Change ☒ Addition
NAME Donald D. Wirth
STREET ADDRESS 1007 N. Market Street
CITY-ST-ZIP Wilmington DE 19898

TITLE MGR ☐ Change ☒ Addition
NAME James C. Collins, JR.
STREET ADDRESS 1007 N. Market Street
CITY-ST-ZIP Wilmington DE 19898

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

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

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

11. 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 is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8/20/04

Date

(302) 999-5518

Daytime Phone #