

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002353

FILED
Jan 09, 2007
Secretary of State

Entity Name: THE GRIFFITH FOUNDATION, INC.

Current Principal Place of Business:

<UNUSED>
WINDEREMERE, FL 34786 US

New Principal Place of Business:

1415 LAKE WHITNEY DR
WINDEREMERE, FL 34786 US

Current Mailing Address:

1415 LAKE WHITNEY DRIVE
WINDEREMERE, FL 34786 US

New Mailing Address:

FEI Number: 58-1654371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFITH, RICHARD S SR
1415 LAKE WHITNEY DRIVE
WINDEREMERE, FL 34786 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

OFFICERS AND DIRECTORS:

Title: MR () Delete
Name: GRIFFITH, RICHARD S SR
Address: 1415 LAKE WHITNEY DRIVE
City-St-Zip: WINDEREMERE, FL 34786

Title: MRS () Delete
Name: GRIFFITH, ANN W
Address: 1415 LAKE WHITNEY DRIVE
City-St-Zip: WINDEREMERE, FL 34786

Title: MR () Delete
Name: GRIFFITH, RICHARD S JR
Address: 8348 TIBET BUTLER DRIVE
City-St-Zip: WINDEREMERE, FL 34876

Title: MRS () Delete
Name: LAIRD, ROBIN G
Address: 304 DIANNE STREET
City-St-Zip: BROOKHAVEN, MS 39601

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD S GRIFFITH SR

PRES

01/09/2007

Electronic Signature of Signing Officer or Director

Date