

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000088350

FILED  
Mar 26, 2011  
Secretary of State

**Entity Name:** GRIFF'S BACK COUNTRY TOURS, INC.

**Current Principal Place of Business:**

231 9TH ST NW  
NAPLES, FL 34120

**New Principal Place of Business:**

**Current Mailing Address:**

231 9TH ST NW  
NAPLES, FL 34120

**New Mailing Address:**

**FEI Number:** 59-3676014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRIFFIN, KEM A  
231 9TH ST NW  
NAPLES, FL 34120 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: PSTD  
Name: GRIFFIN, KEM A  
Address: 231 9TH ST NW  
City-St-Zip: NAPLES, FL 34120

Title: VD  
Name: GRIFFIN, DEBORAH S VP  
Address: 231 9TH ST NW  
City-St-Zip: NAPLES, FL 34120

Title: T  
Name: ASHLEY, N REX T  
Address: 1044 CASTELLO DRIVE STE # 106  
City-St-Zip: NAPLES, FL 34103 US

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: N. REX ASHLEY

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03/26/2011

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

\_\_\_\_\_ Date