

**2007 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT**

DOCUMENT # P01000074981



1. Entity Name
JOHN GRIFFITH & ASSOCIATES, INC.

Principal Place of Business
5313 WARREN ST
NAPLES, FL 34113

Mailing Address

5313 WARREN ST
NAPLES, FL 34113

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08132007 Chg-P CR2E034 (12/06)

4. FEI Number
59-3743245

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BLACKBURN, E. BERNARD
7701 JEWEL LN.
PO BOX 10301, NAPLES 34101
NAPLES, FL 34109

Name *JOHN E GRIFFITH SR*
Street Address (P.O. Box Number is Not Acceptable)
5313 WARREN ST
NAPLES, FL 34113

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

John E Griffith Jr

(NOTE: Registered Agent signature required when translating)

DATE

Amended AR Is \$61.25

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME GRIFFITH, JOHN E SR
STREET ADDRESS 5313 WARREN ST.
CITY-ST-ZIP NAPLES, FL 34113

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

30001000704983 Change Addition

08/28/07--01033--008 \$70.00

TITLE V
NAME BLACKBURN, E B
STREET ADDRESS 5313 WARREN ST.
CITY-ST-ZIP NAPLES, FL 34113

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
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CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John E Griffith Jr*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #