## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000117968

Entity Name: GRIMES 'N GLASS, INC.

FILED Jan 03, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

273940 MURRHEE ROAD 273940 MURRHEE ROAD

P O BOX 0552 P O BOX 0552

HILLIARD, FL 320460552 US HILLIARD, FL 320466659 US

**Current Mailing Address:** New Mailing Address:

PO BOX 0552 PO BOX 0552

273940 MURRHEE ROAD 273940 MURRHEE ROAD HILLIARD, FL 320460552 US HILLIARD, FL 320466659 US

FEI Number: 59-3761027 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GRIMES, VICTOR R GRIMES, VICTOR R 273940 MURRHEE ROAD 273940 MURRHEE ROAD P O BOX 0552 P O BOX 0552

HILLIARD, FL 320466659 US HILLIARD, FL 320460552 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: VICTOR R. GRIMES

01/03/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

GRIMES, VICTOR R GRIMES, VICTOR R Name: Name:

P O BOX 0552-273940 MURRHEE ROAD P O BOX 0552-273940 MURRHEE ROAD Address: Address:

City-St-Zip: HILLIARD, FL 320460552 US City-St-Zip: HILLIARD, FL 320466659 US

DT Title: Title: () Delete (X) Change ( ) Addition

Name: GRIMES, MARY E Name: GRIMES, MARY E

P O BOX 0552-273940 MURRHEE ROAD P O BOX 0552-273940 MURRHEE ROAD Address: Address:

HILLIARD, FL 320460552 US HILLIARD, FL 320466659 US City-St-Zip: City-St-Zip:

() Delete Title: Title: DS () Change () Addition BLAIR, THOMAS A Name: Name:

P.O. BOX 1670 - 54025 JEANNIE RD Address: Address: City-St-Zip: CALLAHAN, FL 320111670 US City-St-Zip:

Title: VΡ (X) Delete Title: () Change () Addition

HOWARD, ROBERT J JR. Name: Name: Address: 1622 PARADELA PLACE Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 322215433

Title: Title: ( ) Delete (X) Change ( ) Addition

COURCHENE, JOSHUA A Name: Name: COURCHENE, JOSHUA A

P O BOX 0552-273940 MURRHEE RD Address: P O BOX 0552-273940 MURRHEE RD Address:

City-St-Zip: HILLIARD, FL 320460552 City-St-Zip: HILLIARD, FL 320466659

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: VICTOR R. GRIMES DP 01/03/2006