

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000087581

**Entity Name:** GRIFFING PROPERTIES, INC.

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

115 PINE TREE DR  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

115 PINETREE DRIVE  
GULF BREEZE, FL 32561

**New Mailing Address:**

115 PINE TREE DR  
GULF BREEZE, FL 32561

**FEI Number:** 05-0526658

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRIFFING, CATHY  
115 PINTREE DRIVE  
GULF BREEZE, FL 32561 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: P  
Name: GRIFFING, JOHN  
Address: 115 PINETREE DRIVE  
City-St-Zip: GULF BREEZE, FL 32561

Title: V  
Name: GRIFFING, CATHY  
Address: 115 PINETREE DRIVE  
City-St-Zip: GULF BREEZE, FL 32561

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: JOHN GRIFFING

P

02/17/2011

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

\_\_\_\_\_  
Date