

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099859

Entity Name: GG GRIFFA, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

506 TWYLA BLVD
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

506 TWYLA BLVD
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 20-0483359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RITENOUR, ANTHONY L ESQ
551 SOUTH COMMERCE AVE
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

GRIFFA, GUILLERMO G
506 TWYLA BLVD
LAKE PLACID, FL 33852 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: GUILLERMO GRIFFA

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: GRIFFA, GUILLERMO G
Address: 506 TWYLA BLVD
City-St-Zip: LAKE PLACID, FL 33852

Title: DV () Delete
Name: GRIFFA, KATHLEEN
Address: 506 TWYLA BLVD
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), 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: KATHLEEN GRIFFA

VP

04/30/2005

Electronic Signature of Signing Officer or Director

Date