

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90001 004 ***158.75

DOCUMENT # P05000084543					
1. Entity Name GRIMES INVESTMENTS, INC.					
Principal Place of Business 395 CORPORATE WAY ORANGE PARK, FL 32073			Mailing Address C/O DAVID A KING ESQ 1416 KINGSLEY AVENUE ORANGE PARK, FL 32073		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3807629	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent KING, DAVID A ESQ 1416 KINGSLEY AVENUE ORANGE PARK, FL 32073				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				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 _____ (NOTE: Registered Agent signature required when reinstating)					
Signature, typed or printed name of registered agent and title if applicable.					
DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00					
9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE D	<input type="checkbox"/> Delete				
NAME GRIMES, RICHARD S	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
STREET ADDRESS 395 CORPORATE WAY	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
CITY-ST-ZIP ORANGE PARK, FL 32073	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE D	<input type="checkbox"/> Delete				
NAME GRIMES, DALLAS M	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
STREET ADDRESS 395 CORPORATE WAY	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
CITY-ST-ZIP ORANGE PARK, FL 32073	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE 	<input type="checkbox"/> Delete				
NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE 	<input type="checkbox"/> Delete				
NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE 	<input type="checkbox"/> Delete				
NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11					
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: <u>X Dallas Grimes vs Dallas Grimes</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date					
Daytime Phone #					