

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 SEP 18 AM 10:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



08222006 Chg-P CR2E034 (11/05)

<b>DOCUMENT # P05000100635</b> 1. Entity Name <b>TOMMY GRIMES VINYL, INC.</b>					
Principal Place of Business <b>8181 CAYUGA TRAIL W.</b> <b>JACKSONVILLE, FL 32244 US</b>			Mailing Address <b>8181 CAYUGA TRAIL W.</b> <b>JACKSONVILLE, FL 32244 US</b>		
2. Principal Place of Business <b>14882 Yellow Water Lane</b> Suite, Apt. #, etc.		3. Mailing Address <b>14882 Yellow Water Lane</b> Suite, Apt. #, etc.			
City & State <b>Jax., FL.</b>		City & State <b>Jax., FL.</b>		4. FEI Number <b>20-3229054</b>	
Zip <b>32234</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GRIMES, TOMMY E</b> <b>8181 CAYUGA TRAIL W.</b> <b>JACKSONVILLE, FL 32244</b>				7. Name and Address of New Registered Agent  Name <b>Grimes, Tommy E.</b> Street Address (P.O. Box Number is Not Acceptable) <b>14882 Yellow Water Lane</b>  City <b>Jacksonville</b> <b>FL</b> Zip Code <b>32234</b>	
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.  <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE   <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 20%; text-align: center;"> <b>9-2-06</b>  <small>DATE</small> </div> </div>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>GRIMES, TOMMY E</b> <b>8181 CAYUGA TRAIL W</b> <b>JACKSONVILLE, FL 32244</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P, D.</b> <b>Grimes, Tommy E.</b> <b>14882 Yellow Water Lane</b> <b>Jacksonville, FL 32234</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:			<b>9-2-06</b> <small>Date</small>		

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