FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL -3 AM 8:40

DOCUMENT # P94000004787 (5)

1. Corporation Name

GRIFFYN ENTERPRISES, INC.

Principal Place of Business
4039 N. WATERBRIDGE CR.
PORT ORANGE FL

Mailing Address
4039 N. WATERBRIDGE CR.
PORT ORANGE FL

DO NOT WRITE IN THIS SPACE JUNE 28-95

3. Date Incorporated or Qualified: 01/10/1994
3a. Date of Last Report: FIRST REPORT

2. Principal Place of Business: SAME AS ABOVE
2a. Mailing Address: SAME AS ABOVE

4. FEI Number: 582095359 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has tangible property for intangible tax under S. 199.032, Florida Statutes X Yes ☐ No

9. Name and Address of Current Registered Agent

COLLINGS, ELIZABETH C
4039 N. WATERBRIDGE CR.
PORT ORANGE FL

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

NONE

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	COLLINGS, RODNEY
STREET ADDRESS	4039 N. WATERBRIDGE CR.
CITY, ST, ZIP	PORT ORANGE FL
TITLE	D
NAME	COLLINGS, ELIZABETH C
STREET ADDRESS	4039 N. WATERBRIDGE CR.
CITY, ST, ZIP	PORT ORANGE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (Change / Addition): none entered

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

ELIZABETH C COLLINGS

SIGNATURE: Elizabeth C. Collings — JUNE 28-95 — 904 788 2385
Signature of Officer or Director / Date / Daytime Phone #