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FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000043879 (3)

1. Corporation Name

GRIFFIS & SONS FIBERGLASS, INC.

Principal Place of Business

Mailing Address

NE 34TH AVENUE AND US HIGHWAY 301
STARKE FL 32091

NE 34TH AVENUE
P.O. BOX 100 P.O. BOX 1132
STARKE FL 32091

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/08/1994

4. FEI Number

59-3254688

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 NE 34th Avenue

22 City & State

27 Suite, Apt. #, etc.

P.O. BOX 1132

23 Zip

25 Country

28 Zip

30 Country

24

25

28

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JONES, MICHAEL W ESQ.
4045 NEWBERRY ROAD
GAINESVILLE FL 32607

81 Name X DUDLEY P. HARDY

82 Street Address (P.O. Box Number is Not Acceptable)

996 N. TEMPLE AVE.

83

84 City

STARKE,

FL

85

Zip Code

32091

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 familiar with, and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME D
STREET ADDRESS GRIFFIS, WOODROW D SR.
CITY-ST-ZIP N. E. 39TH AVENUE AND U.S. HIGHWAY 301
STARKE FL 32091

1.1 TITLE X PRESIDENT ☐ Change ☐ Addition
1.2 NAME GRIFFIS, WOODROW D. JR.
1.3 STREET ADDRESS N.E. 187 Street and US HWY 301
1.4 CITY-ST-ZIP STARKE, FL 32091

TITLE ☐ DELETE
NAME D
STREET ADDRESS GRIFFIS, PAULINE O
CITY-ST-ZIP N. E. 39TH AVENUE AND U.S. HIGHWAY 301
STARKE FL 32091

2.1 TITLE X SECRETARY ☐ Change ☐ Addition
2.2 NAME GRIFFIS, ALICE M.
2.3 STREET ADDRESS N.E. 187 Street and US HWY 301
2.4 CITY-ST-ZIP STARKE, FL 32091

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE TREASURER ☐ Change ☐ Addition
3.2 NAME GRIFFIS, ANGELA P.
3.3 STREET ADDRESS N.E. 187 Street and US HWY 301
3.4 CITY-ST-ZIP STARKE, FL. 32091

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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.

SIGNATURE

Signature of registered agent

DATE: April 16, 1998 94000043879

CR2E034 (10/97)