FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P94000065453 (0) DOCUMENT #

GRINER MOTORS, INC.

Principal Place of Business

Mailing Address

COOK AL OBANGE DI GOCOLL TOAL



ORLANDO FL 32810			ORLANDO FL 32810							د	
							3.	Date Incorporated or Qualified 09/07/1994	3a. Dat	e of Last Report 04/17/1995	
2. Principal Place of Business 22. Availing Address 22. Walling Address 22. SAMC							4.	FEI Number 59-3265907	4. -	Applied For Not Applicable	
Suite, A	pt. #, etc.	27	Suite, Apt. #, etc.				5.	Certificate of Status Desired		\$8.75 Additional Fee Required	
3 City & S م ایم (3 ا	IAndo Fl. 28							Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
4] 32 &	32808 25 SRAnge 29			Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes \(\begin{array}{c}\				
	9. Name and Address	s of Current Regi	stered Agent				10.	Name and Address of New	Registered	Agent	
GRINER, LUNZA 6660 N ORANGE BLOSSOM TRAIL ORLANDO FL 32810					Bí	Name					
					62	Street Address (P.O. Box Number is Not Acceptable)					
					83						
					84	City			FL	85 Zip Code	
or regi	int to the provisions of Section stered agent, or both, in the S r with, and accept the obligation	tate of Florida. Suc	h change was authoriz	ed by the c	ve-na	anted corpora ration's boar	ation si	ubmits this statement for the prectors. I hereby accept the ap-	urpose of ch pointment a	anging its registered offic s registered agent. I am	
SIGNATUR	Styr at me, typed or printed name of	real stonest agent and the fi	appinanio (NC)Tt : Registered	Agent	signature required	d when ru	nstatusi)	DATE		
12.	CFFICERS AND DIRECTORS 13.						ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
1 14 F	PD	PD □ DELETE 11			TLE	T				☐ Change ☐ Addition	
NOM:	GRINER, LUNZA V	1		1210	SME						

6660 N ORANGE BLOSSOM TRAIL 13 STREET ADDRESS STREET ADDRESS. ORLANDO FL 32810 14 CITY - ST - ZIP ettange DELETE 2 1 TITLE GRINER, DOROTHY V Griner, Dorothy NAME 2.2 NAME 6660 N ORANGE BLOSSOM TRAIL STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32810 f. 11 - \$1 - 7(P 24 CITY - ST - ZIP DELETE ☐ Change Addition TILL 3 1 TITLE TAYLOR, DEBORAH L NSE 32 NAME 6660 N ORANGE BLOSSOM TRAIL STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32810 00Y-51-2if 3 4 CITY - ST - ZIP DELETE THE 4 1 10 LE ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-\$1-ZIP DELETE 1-116 5 1 TITLE ☐ Change ☐ Addition 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS Dily-SI-ZP 5.4 City-St-ZiP DELETE Change TillE 6 1 TITLE ☐ Addition NAME 62 NAME STREET ALCOHESS 6.3 STREET ADDRESS OILY - \$1 - 716 64 CITY-ST-ZIP

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)(k), 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 cath, that I am an officer or director of the corporation 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:

UNZA V. ORINEN 2-6-96 (407) 293-0307

CR2E034 (12/95)