

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000079106 (8)

1. Corporation Name

THE GRIND, INC.

Principal Place of Business

41 CORDOVA STREET
ST. AUGUSTINE FL 32084

Mailing Address

41 CORDOVA STREET
ST. AUGUSTINE FL 32084



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
10/26/1994

3a. Date of Last Report
07/25/1995

4. FEI Number
59-3274911

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 liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

O'NEILL, JENNIFER M.
41 CORDOVA STREET
ST. AUGUSTINE FL 32084

10. Name and Address of New Registered Agent

81 Name THOMAS C O'NEILL

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

83

84 City ST AUGUSTINE FL

85 Zip Code 32084

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 THOMAS C O'NEILL

THOMAS C. O'NEILL PRESIDENT

4-29-96

12. OFFICERS AND DIRECTORS

TITLE D
NAME O'NEILL, JENNIFER M
STREET ADDRESS 55 ABBOTT STREET
CITY - ST - ZIP ST. AUGUSTINE FL 32084 ☒ DELETE

TITLE D
NAME O'NEILL, THOMAS C
STREET ADDRESS 106 JOLLY ROGER COVE
CITY - ST - ZIP STAFFORD VA 22554 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP ☐ Change ☐ Addition

DELETION

2.1 TITLE PRESIDENT ☒ Change ☐ Addition
2.2 NAME O'NEILL, THOMAS C
2.3 STREET ADDRESS 41 CORDOVA STREET
2.4 CITY - ST - ZIP ST. AUGUSTINE, FL 32084

3.1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition
3.2 NAME RUTH J. O'NEILL
3.3 STREET ADDRESS 41 CORDOVA STREET
3.4 CITY - ST - ZIP ST AUGUSTINE, FL 32084

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

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

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

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS C. O'NEILL THOMAS C. O'NEILL

4-29-96 804-5421

Date Daytime Phone #

CR2E034 (12/95)