FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000079410 (1)

GRIFFIN HOLDING COMPANY II, INC.

FILED May 13 1998 8:00am Secretary of State



					: 00 (80 0 0 0 0	(Mille)	
Principal Plac	•						
1390 MAIN STREET 1390 MAIN STREET							
SARAGOIA	SARASOTA FL 34236 SARASOTA FL 34236			DO NOT WRITE II	DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified			
				09/12/1997			
2. Principal P	lace of Business 2a. Mailing Ac	idress	776	4. FEI Number		plied For	
21 / 8 - 2) S. (Sprey Hw. 26 1.0.	DOX .	728	37-3503131		Applicable	
SUMBAYAPI.	Suite, Apt	. #, etc.		5. Certificate of Status Desired	\$8.75 A		
Offiv & Stat	7 1007 27 00% Sta	te	**************************************	6. Election Campaign Financing	\$5.00	<u> </u>	
23 NY	OSATO. FL 🔞 SUN	Inta.	FL	Trust Fund Contribution	Added to		
7840	Coyntu Zip	20	Country	8. This corporation owes or has paid	the current year Inta	ngible	
	39 25 USA 29 34a	3 0	USA	Personal Property Tax due Jurie 3		No	
	9. Name and Address of Current Registered Ager	ıt		10. Name and Address of New Regi	istered Agent		
MC	CCURDY, JEFFREY		B1 Name				
	90 MAIN STREET		82 Sye9(A	sigkess@P.O. Pox Number is NonAcceptable	9)		
SA	RA\$OTA FL 34236		183	O. Osprey Hur.			
			83	te IMA			
			84 City	mesto	85 2 0 A	odes O	
				1 45019	FL * 3/	957	
11. Pursuant office or r	to the provisions of Sections 607.0502 and 607.1508, Fl registered agent, or both, in the State of Florida. Such ch im familiar with, and accept the obligations of, Section 6	ori da Statutes, nange was auth	the above-named o torized by the corpo	corporation submits this statement for the pu oration's board of directors. I hereby accept	rpose of changing its the appointment as r	registered egistered	
agent la	ım fami liar with, and accept the obligations of, Section 6	0 7,0 505, Florid	a Statutes.				
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE Re	egistored Agent signature r	equired when reinsteling)	DATE		
12.	OFFICERS AND DIRECTORS	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.	ADDITIONS/CHANGES TO OFFICE		3 IN 12	
TITLE	PTD	DELETE	1.1 TITLE		Change	Addition	
NAME	William D. Griffin		1.2 NAME				
STREET ADDRESS	[8305, Osprey AW, Suite 1004		1.3 STREET ADDRESS				
CITY-ST-ZIP	Sarasata FL 31239		1.4 CITY - ST - ZIP				
TITLE		DELETE	2.1 TITLE		Change	Addition	
NAME	Jeffrey R. McCurdy,		2.2 NAME				
STREET ADDRESS	1830 s osprey Aw. Sujte 100.	*	2 3 STREET ADDRESS			Į	
CITY-ST-ZIP	Sarasota, PL 31239		2. 4 CITY - ST - ZIP			- 	
TITLE		DELETE	3.1 TITLE		☐ Change	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change	Addition	
TITLE	l \Box	DELETE	4.1 TITLE		☐ Change	☐ AUGIRION	
NAME			4. 2 NAME			ł	
STREET ADDRESS			4.3 STREET ADDRESS			Ì	
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change	Addition	
TITLE	 	DECETE	5.1 TITLE		■ Criange	☐ Watering	
NAME ATTEST ADDRESS			5.2 NAME				
STREET ADDRESS			5 3 STREET ADDRESS			ļ	
CITY-ST-ZIP		DELETE	6.1 TITLE		Change	Addition	
TITLE		DELLIL	1			AVORIOR	
NAME OTRECT + DROPESS			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS			ļ	
CITY-ST-ZIP			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 attychment with an address.

CICMATURE.

2/20/98

(941) 31K-1018