

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000079550

1. Entity Name  
DRAGGIN TRAILERS, INC.



**FILED**  
**Feb 12, 2005 08:00 AM**  
**Secretary of State**

Principal Place of Business  
2017 NS JACKSONVILLE RD  
OCALA, FL 34470 US

Mailing Address  
2017 NS JACKSONVILLE RD  
OCALA, FL 34470 US



01102005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3467511

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

GRIFFIN, KENNETH L JR.  
3000 SE 50TH PLACE  
OCALA, FL 34480

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	KENNETH, GRIFFIN JR.
STREET ADDRESS	3000 SE 50TH PLACE
CITY-ST-ZIP	OCALA, FL 34480
TITLE	V
NAME	GRIFFIN, KENNETH III
STREET ADDRESS	5621 SE 23 LANE
CITY-ST-ZIP	OCALA, FL 34471
TITLE	S
NAME	GRIFFIN, DENISE
STREET ADDRESS	5621 SE 23 LANE
CITY-ST-ZIP	OCALA, FL 34471
TITLE	T
NAME	GRIFFIN, DOROTHY
STREET ADDRESS	3000 SE 50 PLACE
CITY-ST-ZIP	OCALA, FL 34480
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000227743  
02/14/05-80011-009 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth L Griffin Jr Kenneth L GRIFFIN JR. 2/10/05 352 401-9818  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #