

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90336 003 \*\*\*150.00

DOCUMENT # P97000101416

1. Entity Name  
GRINDLE MORTGAGE, INC.



Principal Place of Business  
223 TRAFFORD AVE  
ORANGE CITY, FL 32763

Mailing Address  
223 TRAFFORD AVE  
ORANGE CITY, FL 32763

40084074

2. Principal Place of Business - No P.O. Box #  
1147 Barnacle Ter  
Suite, Apt. #, etc.

3. Mailing Address  
1147 Barnacle Ter  
Suite, Apt. #, etc.

04232008 Chg-P CR2E034 (12/06)

City & State  
The Villages, FL  
Zip 32162 Country Sumter

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The Villages, FL  
Zip 32162 Country Sumter

4. FEI Number  
59-3480841

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

GRINDLE, ARTHUR E  
223 TRAFFORD AVE  
ORANGE CITY, FL 32763

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
1147 Barnacle Terrace  
City The Villages, FL Zip Code 32162

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 ☒ *Arthur E. Grindle*  
Signature, typed or printed name of registered agent, and title if applicable.

*Arthur E. Grindle* 4-25-08  
(NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PST  
GRINDLE, ARTHUR E  
223 TRAFFORD AVE  
ORANGE CITY, FL 32763 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☒ Change ☐ Addition  
1147 Barnacle Terrace  
The Villages, FL 32162

TITLE  
NAME  
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☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: ☒ *Arthur E. Grindle* *Arthur E. Grindle* 4-28-08 352-753-4086  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #