2008 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 24, 2008 08:00 Al Secretary of State DOCUMENT # P98000086081 1. Entity Name GRIFFEY ENGINEERING, INC. Principal Place of Business Mailing Address 33 N CENTER ST 33 N CENTER ST SUITE B SUITE B EUSTIS, FL 32726 EUSTIS, FL 32726 01162008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3533942 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent GRIFFEY, DONALD A DO NOT WRITE 36202 E. ELDORADO LAKE DR EUSTIS, FL 32736 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GRIFFEY, DONALD A 36202 E. ELDORADO LAKE DR STREET ADDRESS CITY-ST-ZIP EUSTIS, FL 32736 TITLE NAME STREET ADDRESS Ü00000795012 k CITY+ST-ZIP 01/28/08-8003**0-**015¹ STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZiP NAME STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not goalify 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:

CITY-ST-ZIP

ME OF SIGNING OFFICER OR DIRECTOR

352-357-3528

FILED