

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 19, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P98000103215**1. Entity Name  
**JOSEPH GRAIN COMPANY**

## Principal Place of Business

240 SUNSET WAY

PALM HARBOR  
34683

FL

## Mailing Address

PO BOX 937

PALM HARBOR  
34682

FL

## 2. Principal Place of Business

925 16TH WAY

## 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

## City &amp; State

PALM HARBOR

FL

## City &amp; State

Zip  
34683

Country

Zip

Country

## 4. FEI Number

**59-3548047**

Applied For

Not Applicable

## 5. Certificate of Status Desired

☒**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

LEOPOLD ZANE K  
240 SUNSET WAYPALM HARBOR  
34683

FL

## 7. Name and Address of New Registered Agent

## Name

GARRETT GRADY H

Street Address (P.O. Box Number is Not Acceptable)  
925 16TH WAYCity  
PALM HARBOR

FL

Zip Code  
34683

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.

SIGNATURE **GRADY GARRETT**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**04/19/2001**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE T ☐ Delete  
NAME GARRETT GRADY  
STREET ADDRESS 925 16TH WAY  
CITY-ST-ZIP PALM HARBOR FL 34683TITLE P ☐ Delete  
NAME LEOPOLD ZANE  
STREET ADDRESS 240 SUNSET WAY  
CITY-ST-ZIP PALM HARBOR FL 34683TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE P ☒ Change ☐ Addition  
NAME GARRETT PHYLLIS  
STREET ADDRESS 925 16TH WAY  
CITY-ST-ZIP PALM HARBOR FL 34683TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Grady Garrett**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mr.

04/19/2001

Date

Daytime Phone #

CR2E034 (11/00)