

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012090

FILED
Feb 12, 2009
Secretary of State

Entity Name: GRIPPO PAVEMENT MAINTENANCE INC.

Current Principal Place of Business:

4310 GOEBLE ROAD
FORT MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

PO BOX 1837
LEHIGH ACRES, FL 33970

New Mailing Address:

FEI Number: 65-0903999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRIPPO, SAMUEL P
696 BELL BLVD
LEHIGH ACRES, FL 33974 US

Name and Address of New Registered Agent:

GRIPPO, SAMUEL P
2600 40TH STREET WEST
LEHIGH ACRES, FL 33971 US

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: SAMUEL P GRIPPO

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRIPPO, SAMUEL P
Address: 696 BELL BLVD
City-St-Zip: LEHIGH ACRES, FL 33974

Title: VP () Delete
Name: GRIPPO, CHRISTINE M
Address: 696 BELL BLVD
City-St-Zip: LEHIGH ACRES, FL 33974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRIPPO, SAMUEL P
Address: 2600 40TH STREET WEST
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VP (X) Change () Addition
Name: GRIPPO, CHRISTINE M
Address: 2600 40TH STREET WEST
City-St-Zip: LEHIGH ACRES, FL 33970

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL P GRIPPO

PRES

02/12/2009

Electronic Signature of Signing Officer or Director

Date