FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # S40924

(0)

2a. Mailing Address

GRIN & BARRIT, INC.

2. Principal Place of Business

Principal Place of Business	Mailing Address	
201 N. FRANKLIN ST. SUITE 2100 TAMPA FL 33602	P.O. BOX 3141 TAMPA FL 33601	

FILED Jan 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified

03/25/1991 4. FEI Number

21		26	26				-	65-0253224	[No	ot Applicable		
Suite, Apt.	#, etc	Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	e	City &	State					6. Election Campaign Financing		\$5.00	May Be	
23		28	-, ´					Trust Fund Contribution		Added 1		
Žip	Country	Zip		Cou	intry			8. This corporation owes or has p	aid the cur			
24	25	29		30				Personal Property Tax due Juni] No	
•	9. Name and Address of Current	Registered A	gent					10. Name and Address of New Ro	egistered .	Agent		
FDV	WARDS, JOSEPH D.				81	Name						
201 N. FRANKLIN STREET ONE TAMPA CITY CENTER SUITE 2100 TAMPA FL 33602					82 Street Address (P.O. Box Number is Not Acceptable)							
					OZ Sueet Address (P.O. Box Number is Not Acceptable)							
					83							
., .,					-	0.5				T1		
,					84	City			FL	85 Zip (Code	
11. Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508 f Florida, Suc	3, Florida Statute h change was a	s, the a uthorize	bove d bv	-named c	orpor	ation submits this statement for the	purpose of	changing it	s registered registered	
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligat	ons of, Section	on 607.0505, Flo	rida Sta	tutes				,_ , upp		5.0.0.00	
SIGNATURE											 .	
	Signature, typed or printed name of registered agent OFFICERS AND		ole. (NOTE		d Ager	nt signature re	equired	when reinstating)	DATE	DIDECTE-	- ·	
12.	PSTD OFFICERS AND	DIRECTORS	DELETE	13.	TI F	····		ADDITIONS/CHANGES TO OFFI	CERS AND	Change	RS IN 12 Addition	
										□ cuange	Mudition	
NAME	EDWARDS, JOSEPH D.			1.2 N								
STREET ADDRESS	201 N FRANKLIN SUITE 2100					ADDRESS						
CITY-ST-ZIP	TAMPA FL		DELETE		TY-ST	- ZIP				[] ()	0.4493	
TITLE	VP		☐ DECEIE	2.1 TI				عين		LI Change	Addition	
NAME	EDWARDS, SIGRID			2.2 N/				•				
STREET ADDRESS	607 W HORATIO STREET.					ADDRESS						
CITY-ST-ZIP	TAMPA FL		L octobre		ITY-ST	r-ZIP				T-0	1 4.422	
TITLE	VP		☐ DELETE	3.1 TC		İ				LI Change	Addition	
NAME	LACEY, GEORGE			3.2 N								
STREET ADDRESS	100 THATCHER STREET					ADDRESS						
CITY-ST-ZIP	TAMPA FL	e	DELETE		ITY-S1	r-ZIP				1 (5	I A dell'e	
TITLE			☐ DELETE	4.1 TF						Change	Addition	
NAME				4. 2 N								
STREET ADDRESS						NDDRESS						
CITY - ST - ZIP			LDELETE	_	TY-ST	- ZIP				Change	A dalah-	
TITLE			☐ DELETE	5.1 TF						L Change	Addition	
NAME				5.2 N/								
STREET ADDRESS						NDDRESS						
CITY-ST-ZIP			D DOLLER	_	TY-ST	- ZIP				- Observe	Lagre	
TITLE			☐ DELETE	6.1 Ti						Change	∐ Addition	
NAME				6,2 NA		1						
STREET ADDRESS				6.3 ST	reet a	DDRESS						
CiTY-ST-ZIP				6.4 CI								
14. I hereby c	ertify that the information supplied with	this filing doe	es not qualify for	r the exe	mpti	on stated	in Se	ection 119.07(3)(i), Florida Statutes. I	further cer	tify that the	information	

officer or director of the corporation or the receiver or trusted industrial and account this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an atlachment with an address.

SIGNATURE:

1/6/94 (813) 229-3321