DOCUMENT# N97000001408	S
Entity Name: GRIFFWOOD CO-OP, INC.	
Current Principal Place of Business:	

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

03896 PICCIOLA RD FRUITLAND PARK, FL 34731

REPORT

Current Mailing Address:

03896 PICCIOLA RD FRUITLAND PARK, FL 34731 US

FEI Number: 59-3439600

Name and Address of Current Registered Agent:

BOYLE, JILL A 3896 PICCIOLA RD . OFFICE FRUITLAND PARK, FL 34731 US

FILED Oct 25, 2016 Secretary of State CC4867910454

Certificate of Status Desired: No

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

The above name	d entity submits this statement for the purpose of changing it	ts registered office or regis	tered agent, or both, in the State of Flor	ida.
SIGNATURE	E: JILL A BOYLE			10/25/2016
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT, DIRECTOR	Title	TREASURER, DIRECTOR	
Name	MCKAUFSKY, GREGORY	Name	SKOLDS, MARK	
Address	03896 PICCIOLA RD	Address	03896 PICCIOLA ROAD	
City-State-Zip:	FRUITLAND PARK FL 34731	City-State-Zip:	FRUITLAND PARK FL 34731	
Title	SECRETARY	Title	DIRECTOR	
Name	SPENCER, ROBERT	Name	MONTGOMERY, PATRICIA IRE	NE
Address	03896 PICCIOLA ROAD	Address	03896 PICCIOLA ROAD	
City-State-Zip:	FRUITLAND PARK FL 34731	City-State-Zip:	FRUITLAND PARK FL 34731	
Title	VP	Title	DIRECTOR	
Name	ROBINSON, GLEE ANN	Name	WELLS, CECIL	
Address	03896 PICCIOLA ROAD	Address	3896 PICCIOLA ROAD	
City-State-Zip:	FRUITLAND PARK FL 34731	City-State-Zip:	FRUITLAND PARK FL 34731	
Title	DIRECTOR	Title	DIRECTOR	
Name	NENNE, LARRY	Name	LANDLE, ROBERT	
Address	3896 PICCIOLA ROAD	Address	03896 PICCIOLA RD	
Citv-State-Zip:	FRUITLAND PARK FL 34731	City-State-Zip:	FRUITLAND PARK FL 34731	

Continues on page 2

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GLEE ANN ROBINSON

City-State-Zip: FRUITLAND PARK FL 34731

VP

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BARKER, JOE
Address	3896 PICCIOLA ROAD
City-State-Zip:	FRUITLAND PARK FL 34731