

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 647796

**Entity Name:** SAUL GRIMES & ASSOCIATES, INC.

**Current Principal Place of Business:**

911 W. OAKLAND AVE.  
OAKLAND, FL 34760-0175

**Current Mailing Address:**

P.O. BOX 175  
OAKLAND, FL 34760-0175

**FEI Number:** 59-1955194

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GRIMES, SAUL  
880 TILDENVILLE SCHOOL RD.  
WINTER GARDEN, FL 34787 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	STD
Name	GRIMES, SAUL	Name	GRIMES, ANN
Address	911 W, OAKLAND AVE.	Address	911 W. OAKLAND AVE.
City-State-Zip:	OAKLAND FL 34760	City-State-Zip:	OAKLAND FL 34760

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

**SIGNATURE:** SAUL GRIMES

**MGR**

**03/17/2015**

Electronic Signature of Signing Officer/Director Detail

Date