

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J35079

FILED
Apr 19, 2011
Secretary of State

Entity Name: GRE SO FLA, INC.

Current Principal Place of Business:

191 W. NATIONWIDE BLVD.
SUITE 200
COLUMBUS, OH 432152568

New Principal Place of Business:

Current Mailing Address:

191 W. NATIONWIDE BLVD.
SUITE 200
COLUMBUS, OH 432152568

New Mailing Address:

FEI Number: 31-1227404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VTD
Name: CASTO, DON M., III
Address: 191 W. NATIONWIDE BLVD., SUITE 200
City-St-Zip: COLUMBUS, OH 432152568

Title: PTD
Name: BENSON, FRANK S., III
Address: 191 W. NATIONWIDE BLVD., SUITE 200
City-St-Zip: COLUMBUS, OH 432152568

Title: D
Name: CASTO, WILLIAM G.
Address: 399 TAYLOR BLVD., #103
City-St-Zip: PLEASANT HILL, CA 94523

Title: D
Name: BENSON, NANCY
Address: 191 W. NATIONWIDE BLVD., SUITE 200
City-St-Zip: COLUMBUS, OH 432152568

Title: D
Name: MORAN, ANN C
Address: 191 W. NATIONWIDE BLVD., SUITE 200
City-St-Zip: COLUMBUS, OH 432152568

Title: D
Name: WIBBELSMAN, NANCY B
Address: 191 W. NATIONWIDE BLVD., SUITE 200
City-St-Zip: COLUMBUS, OH 432152568

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: DON M CASTO, III

VTD

04/19/2011

Electronic Signature of Signing Officer or Director

Date