2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# P04000119126

Entity Name: GRAY SALES INCORPORATED

Current Principal Place of Business:

22810 COLLRIDGE DR.
LAND O LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

22810 COLLRIDGE DR.
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 20-1524905 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, CURTIS
22810 COLLRIDGE DR
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

MILLER, CURTIS J
22810 COLLRIDGE DR
LAND O LAKES, FL 34639 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: CURTIS J MILLER 01/12/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MILLER, CURTIS
Address: 22810 COLLRIDGE DR.
City-St-Zip: LAND O LAKES, FL 34639

Title: V ( ) Delete
Name: MILLER, DEANEE
Address: 22810 COLLRIDGE DR.
City-St-Zip: LAND O LAKES, FL 34639

Title: T ( ) Delete
Name: MILLER, MARY
Address: 22810 COLLRIDGE DR.
City-St-Zip: LAND O LAKES, FL 34639

Title: S ( ) Delete
Name: WOOTEN, TERRY
Address: 14102 RIVERSTONE DR.
City-St-Zip: TAMPA, FL 33624

Title: VP ( ) Delete
Name: BOSWELL, RUBY
Address: 219 CRYSTAL GROVE BLVD
City-St-Zip: LUTZ, FL 33548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RUBY BOSWELL VP 01/12/2009
Electronic Signature of Signing Officer or Director Date