

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102051

FILED  
Apr 28, 2011  
Secretary of State

Entity Name: GRECIAN & COMPANY, INC.

**Current Principal Place of Business:**

2988 NW US HWY 41  
LAKE CITY, FL 32055 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2947  
LAKE CITY, FL 32056 US

**New Mailing Address:**

FEI Number: 20-3193109      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GRECIAN, LYNNE  
2988 NW US HWY 41  
LAKE CITY, FL 32055 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: P  
Name: GRECIAN, PAUL  
Address: PO BOX 2947  
City-St-Zip: LAKE CITY, FL 32056

Title: D  
Name: GRECIAN, PAUL  
Address: PO BOX 2947  
City-St-Zip: LAKE CITY, FL 32056

Title: V  
Name: GRECIAN, JOEL  
Address: PO BOX 2947  
City-St-Zip: LAKE CITY, FL 32056

Title: S  
Name: GRECIAN, JONATHAN  
Address: PO BOX 2947  
City-St-Zip: LAKE CITY, FL 32056

Title: T  
Name: GRECIAN, LYNNE  
Address: PO BOX 2947  
City-St-Zip: LAKE CITY, FL 32056

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: LYNNE GRECIAN

T

04/28/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date