DOCUMENT# N0000006637		Jan 25, 2016		
Entity Name: GRAYTON BEACH NEIGHBORHOOD ASSOCIATION INC.			Secretary	
P.O BOX 2162	ncipal Place of Business: BEACH, FL 32459		CC09070	93855
Current Ma	ling Address:			
P.O BOX 21 SANTA ROS	62 SA BEACӉ FL 32459			
FEI Number: 59-0362938 Certificate of Status			Certificate of Status Desire	ed: No
Name and A	Address of Current Registered Agent:			
MURPHY, ROE 42 LYDIA AVE	NUE			
SANTA ROSA	BEACH FL 32459 US			
	BEACH, FL 32459 US d entity submits this statement for the purpose of changing its re	gistered office or regis	tered agent, or both, in the State of Floric	la.
The above name		gistered office or regis	-	
The above name	d entity submits this statement for the purpose of changing its re	gistered office or regis	-	
The above name SIGNATURI	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY	gistered office or regis	-	01/25/2016
The above name SIGNATURI	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent	gistered office or regis	-	01/25/2016
The above name SIGNATURI Officer/Dire	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent ctor Detail :			01/25/2016
The above name SIGNATURI Officer/Dire Title	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT	Title	D	01/25/2016
The above name SIGNATURI Officer/Dire Title Name	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT MURPHY, ROBERT G 42 LYDIA AVENUE	Title Name	D BUZZETT, BILLY	01/25/2016 Date
The above name SIGNATURI Officer/Dire Title Name Address	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT MURPHY, ROBERT G 42 LYDIA AVENUE	Title Name Address	D BUZZETT, BILLY 216 FOREST STREET	01/25/2016 Date
The above name SIGNATURI Officer/Dire Title Name Address City-State-Zip:	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT MURPHY, ROBERT G 42 LYDIA AVENUE SANTA ROSA BEACH FL 32459	Title Name Address City-State-Zip:	D BUZZETT, BILLY 216 FOREST STREET SANTA ROSA BEACH FL 32459	01/25/2016 Date
The above name SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT MURPHY, ROBERT G 42 LYDIA AVENUE SANTA ROSA BEACH FL 32459 DS	Title Name Address City-State-Zip: Title	D BUZZETT, BILLY 216 FOREST STREET SANTA ROSA BEACH FL 32459 P	01/25/2016 Date
The above name SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title Name	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT MURPHY, ROBERT G 42 LYDIA AVENUE SANTA ROSA BEACH FL 32459 DS JEAN, SILVA 181 PINE ST	Title Name Address City-State-Zip: Title Name Address	D BUZZETT, BILLY 216 FOREST STREET SANTA ROSA BEACH FL 32459 P BLACKWELL, GRANT	01/25/2016 Date
The above name SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title Name Address	d entity submits this statement for the purpose of changing its re E: ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT MURPHY, ROBERT G 42 LYDIA AVENUE SANTA ROSA BEACH FL 32459 DS JEAN, SILVA 181 PINE ST	Title Name Address City-State-Zip: Title Name Address	D BUZZETT, BILLY 216 FOREST STREET SANTA ROSA BEACH FL 32459 P BLACKWELL, GRANT 319 DEFUNIAK STRET	01/25/2016 Date
The above name SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title Name Address City-State-Zip:	d entity submits this statement for the purpose of changing its re E ROBERT G. MURPHY Electronic Signature of Registered Agent Ctor Detail : DT MURPHY, ROBERT G 42 LYDIA AVENUE SANTA ROSA BEACH FL 32459 DS JEAN, SILVA 181 PINE ST SANTA ROSA BEACH FL 32459	Title Name Address City-State-Zip: Title Name Address	D BUZZETT, BILLY 216 FOREST STREET SANTA ROSA BEACH FL 32459 P BLACKWELL, GRANT 319 DEFUNIAK STRET	01/25/2016 Date

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: ROBERT MURPHY

18 LUPINE STREET

City-State-Zip: SANTA ROSA BEACH FL 32459

Address

TREASURER

01/25/2016

FILED

Electronic Signature of Signing Officer/Director Detail