

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102051

Entity Name: GRECIAN & COMPANY, INC.

Current Principal Place of Business:

2988 NW US HWY 41
LAKE CITY, FL 32055

Current Mailing Address:

PO BOX 2947
LAKE CITY, FL 32056 US

FEI Number: 20-3193109

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

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

Title T
Name GRECIAN, PAUL
Address PO BOX 2947
City-State-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

SECRETARY

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date