

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 331435

FILED
Mar 26, 2007
Secretary of State

Entity Name: GRAY'S SECURITY SERVICE, INC.

Current Principal Place of Business:

1742 MANNING ST.
P.O.BOX 10897
JACKSONVILLE, FL 32247 US

New Principal Place of Business:

1742 MANNING ST.
1742 MANNING ST.
JACKSONVILLE, FL 32207 US

Current Mailing Address:

P.O. BOX 10897
JACKSONVILLE, FL 322470897 US

New Mailing Address:

FEI Number: 59-1218500 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, VENIA FAYE
12671 MUIRFIELD BLVD. SO.
JACKSONVILLE, FL 32225 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRAY, JAMES E JR
Address: 827 OLD GROVE MANOR
City-St-Zip: JACKSONVILLE, FL 32207

Title: VDST () Delete
Name: GRAY, VENIA F
Address: 12671 MUIRFIELD BLVD. SO.
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: JAMES E. GRAY JR.

PRES

03/26/2007

Electronic Signature of Signing Officer or Director

Date