2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 10, 2008 08:00 A Secretary of State

DOCUMENT # 618757 1. Entity Name M.R. GRATE, CHARTERED					
Principal Place of Business 1871 PROFESSIONAL PARK CIRCLE TALLAHASSEE, FL 32308 US	Mailing Address P.O. BOX 13808 TALLAHASSEE, FL 32317	US			



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01092008	No Chg-P	CR2E034 (11/05)	

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4. FE! Number Applied For 59-1903813 Not Applied be

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRATE, MYRLE R MD 1871 PROFESSIONAL PARK CIRCLE TALLAHASSEE, FL 32308

DO NOT WRITE IN THIS SPACE

SIGNATURE.	tions of registered agent, Signature, typed or printed name of registered agent and title	f applicable (NOTE: Renistated	Agent signature	Fequired when reinstating)	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financ Trust Fund Contribution.		\$5.00 May Be Added to Fees	<u>04/22/08-88886-024 ;50 00</u>
10.	OFFICERS AND DIRE	CTORS			
NAME STREET ADDRESS CITY-ST-ZIP	MD GRATE, MYRLE R 1871 PROFESSIONAL PARK CIRCLE TALLAHASSEE, FL 32308	E	DO NOT WRITE IN THIS SPACE		
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12. I nereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WAKTE K'CE

4/00/08 850-978-2165

Daytime Phone #