

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000004168

Entity Name: GRAYBUILD LIMITED CO.

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

DUDLEY ROAD  
HALESOWEN, WEST MIDLANDS  
UNITED KINGDOM B63 3NJ, XX

## **New Principal Place of Business:**

1029 THOUSAND OAKS BOULEVARD  
DAVENPORT, FL 33896 US

## **Current Mailing Address:**

P.O. BOX 1375  
HAINES CITY, FL 33845

## **New Mailing Address:**

FEI Number: 74-3059921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THORPE, LYSANDER  
6327 PINEY GLEN LANE  
ORLANDO, FL 32819 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: CPD  
Name: WARD-NIXON, GRAYSTON  
Address: NEEDLERS COTTAGE, GREEN LANE  
City-St-Zip: WARWICKSHIRE, UK B80-7HD, OC

Title: S  
Name: DAVIS, DAVID  
Address: 21 DURHAM CLOSE  
City-St-Zip: BROMSGROVE, UK B61-8SD, OC

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: GRAYSTON WARD-NIXON

CPD

03/15/2010

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

\_\_\_\_\_  
Date