

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F02000004168

FILED  
Apr 25, 2003  
Secretary of State

Entity Name: GRAYBUILD LIMITED CO.

## Current Principal Place of Business:

241 TITFORD ROAD  
OLDSBURY WARLEY, UK, B69 4QE

## New Principal Place of Business:

241 TITFORD ROAD  
OLDSBURY WARLEY, UK, UK B69 4QE

## Current Mailing Address:

5400 S UNIVERSITY DRIVE, SUITE 601  
DAVIE, FL 33328

## 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:

MIRREER, LANCE P  
5400 S UNIVERSITY DRIVE, SUITE 601  
DAVIE, FL 33328 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: C ( ) Delete  
Name: WARD-NIXON, GRAYSTON  
Address: NEEDLERS COTTAGE, GREEN LANE  
City-St-Zip: WARWICKSHIRE, UK, B80 7HD

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change ( ) Addition  
Name: WARD-NIXON, GRAYSTON  
Address: NEEDLERS COTTAGE, GREEN LANE  
City-St-Zip: WARWICKSHIRE, UK B80 7HD

Title: S (X) Change ( ) Addition  
Name: DAVIS, DAVID  
Address: 21 DURHAM CLOSE  
City-St-Zip: BROMSGROVE, UK B61 8SD

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GRAYSTON WARD-NIXON

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04/25/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date