## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

	1996	G0 w1 185	DIVISION	OF CORPO	RATIONS			
Corporatio		F1626	2 (0	))				
GRA	HAD, INC.					\$ <b>(\$2</b> )(\$2 (\$2) (\$2)2 \$(\$2)2 \$(\$2)2		
ncipal Place	e of Business		Mailing Address					
RT 5 BOX 170-X LIVE OAK FL 32060			RT 5 BOX 170-X LIVE OAK FL 32					
						3. Date Incorporated or Qualified	3a. Date of	Last Report
Principal Pl	lace of Business		2a. Mailing Address			01/27/1981	02	/17/1995
			26			4. FEI Number		Applied For
Suite, Apt	#, etc.		Suite, Apt. #, etc.			59-2088033		Not Applicab
Dity & State			27			5. Certificate of Status Desired		8.75 Additional Fee Required
	·		City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be
φ	<b>∤</b> ~1	ıntry	Zip	Cot	untry	8. This corporation has liability for	intannihla tav u	Added to Fees
	25		29	30		Florida Statutes Yes	s □No	ider 5 199.032,
	9, Name and Ad	dress of Current Re	gistered Agent			10. Name and Address of New I	Registered Age	nt
CADI	1005011				81 Name			
	JOSEPH				82 Street Add	dress (P.O. Box Number is Not Acceptate	hle)	
	BOX 365 A DAK FL 32060							
LIVE	JAN FL 32000				83		<u> </u>	
					<u> </u>			
Pursuant to	o the provisions of Se	octions 607.0502 and	607.1508, Florida Stat	utes, the abo	84 City  Ove-named corpor	ration submits this statement for the pu	FL 8	1 '
iature	o the provisions of Se ad agent, or both, in t h, and accept the ob	me of registered agent and til	U7.0505, Florida Statuti	es.	ove-named corpor corporation's boa	ration submits this statement for the purific of directors. I hereby accept the appoint of directors and the statement for the purific of directors and the statement of the sta	rpose of changin ointment as regi	1 '
iature	Signatino typos or primedica	igations of, Section 6	IU7.0505, Florida Statut III: il anpicable (RECTORS	NOTE Registered	ove-named corporation's boat Agent signature require	ed when reinstating)	rpose of changin cointment as regi	g its registered offic stered agent. I am
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SIGNATURE: Biol Hall Down B11 HADDEN 1-17-96 904-776-1048
Desired Proces