FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300003207 (8)

GREYLOR COMPANY

FILED
May 06 1998 8:00am
Secretary of State

200000						
Principal Plac	e of Business	Mailing Address				00106 31110 11011 4031 1691 1691
2340 ANDALUSIA BLVD CAPE CORAL FL 33909 US		2340 ANDALUSIA BLVD CAPE CORAL FL 33909 US		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address			· • · · · · · · · · · · · · · · · · · ·		07/13/1993 4. FEI Number	Applied For
21		26			36-2273351	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip Country		Zip	·		8. This corporation owes or has paid the	
24	25 9. Name and Address of Curr	29 rent Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
DEC		Tent Hogistereo Agent		81 Name	TO. Hallo and Address of New Negister	ed Agent
BECHER, JAMES J 2340 ANDALUSIA BLVD						
CAPE CORAL FL 33909				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
O/u			ļ.	83		
				0.4		
				B4 City	F	85 Zip Code
11. Pursuant I office or re agent. Lai	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob	502 and 607.1508, Florida Statute of Florida. Such change was ligations of Section 607.0505. F	ites, the ab authorized lorida Stati	ove-named corpora	poration submits this statement for the purposition's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE		against of operation occioos, i	onda orace			
	Signature, typed or printed name of registered		TE Registered	Agent signature requi	red when reinsta(ing) DAT	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DVS	DELETE 1.1 TI				☐ Change ☐ Addition
NAME	BECHER, JAMES J.		1.2 NAF			
STREET ADDRESS	2511 S.E. 20 AV.		1.3 STREET ADDRESS			ļi,
CITY-ST-ZIP	CAPE CORAL FL DET DELETE			7-ST-ZIP		-
TITLE NAME			2.1 1111			L Change Addition
STREET ADDRESS	BECHER, NANCY S. 2511 S.E. 20 AV.		2.2 NAM			
CITY-ST-ZIP	CAPE CORAL FL			EET ADDRESS		
TITLE	ON L COUNT IL	DELETE	3.1 TITL	Y-ST-7IP F		Change Addition
NAME			3.2 NAA			- comingo - Modimon
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELET E	4.1 TiTL			☐ Change ☐ Addition
NAME			4. 2 NA	ME		-
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP			4.4 CITY	'-ST-ZIP		
TITLE		DELETE	5.1 TITL	E		☐ Change ☐ Addition
NAME			5.2 NAM	IE		
STREET ADDRESS			5.3 STA	EET ADDRESS		
CITY-ST-ZIP			5.4 CiTy	-S1-ZIP		
TITLE		☐ DELETE	6.1 1ITL	E		Change Addition
NAME			6.2 NAM	le		
STREET ADDRESS			6.3 STRI	EET ADDRESS		
CITY-ST-ZIP			6.4 CITY	- ST- ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.