## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F97150

Entity Name: GRAY LABORATORIES, INC.

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:		New Principal Pla	New Principal Place of Business:	
	KBROOK PKWY SS, GA 30093 US			
Current Ma	ailing Address:	New Mailing Addr	New Mailing Address:	
5885 GLENRIDGE DR SUITE 200 ATLANTA, GA 30328 US		SUITE 200	5885 GLENRIDGE DRIVE SUITE 200 ATLANTA, GA 30328 US	
FEI Number:		FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Addres	s of New Registered Agent:	
2380 S. RIN MELBOUR	NE BCH., FL 32951 US named entity submits this statement for the pu	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Ager	nt	Date	
Election Can	npaign Financing Trust Fund Contribution ( ).			
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHAN	IGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CPD ( ) Delete GRAY, JAMES S 4718 PINE ACRES COURT DUNWOODY, GA 30338 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD ( ) Delete FARRELL, MICHAEL J 8400 HAMPTON BLUFF DRIVE ALPHARETTA, GA 30004 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete CUVIELLO, PAMELA J 1002 DUNBAR DRIVE DUNWOODY, GA 30338 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V (X) Delete TELMAN, WAYNE E 1107 WOODIRON DRIVE DULUTH, GA 30097 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete WILLIAMMEE, JOHN T 2380 S. RIVER ROAD MELBOURNE BEACH, FL 32951 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete TERRY, SMITH P 375 KELSON DRIVE ATLANTA, GA 30329 US	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: PAMELA J. CUVIELLO S 04/27/2005