

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G21387

FILED  
Feb 13, 2008  
Secretary of State

Entity Name: GRAY'S, INC. OF PENSACOLA

## Current Principal Place of Business:

5559 NORTH DAVIS HWY  
SUITE E  
PENSACOLA, FL 32503

## New Principal Place of Business:

5559 NORTH DAVIS HWY  
SUITE E  
PENSACOLA, FL 32503 US

## Current Mailing Address:

5559 NORTH DAVIS HWY  
SUITE E  
PENSACOLA, FL 32503

## New Mailing Address:

5559 NORTH DAVIS HWY  
SUITE E  
PENSACOLA, FL 32503 US

FEI Number: 59-2249863

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAY, ROBERT M.  
16 HIGHPOINT DRIVE  
GULF BREEZE, FL 32561 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: ST ( ) Delete  
Name: GRAY, DONNA P  
Address: 16 HIGHPOINT DRIVE  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: P ( ) Delete  
Name: GRAY, ROBERT M,  
Address: 16 HIGHPOINT DRIVE  
City-St-Zip: GULF BREEZE, FL 32561

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: GRAY, ROBERT M,  
Address: 16 HIGHPOINT DRIVE  
City-St-Zip: GULF BREEZE, FL 32561 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DONNA P. GRAY

ST

02/13/2008

Electronic Signature of Signing Officer or Director

Date