

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 08:00 A
Secretary of State

DOCUMENT # G77925

1. Entity Name
GROSVENOR BUILDING SERVICES, INC.



Principal Place of Business
**3398 PARKWAY CENTER CT.
ORLANDO, FL 32808**

Mailing Address
**3398 PARKWAY CENTER CT.
ORLANDO, FL 32808**



05112007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2363375

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MC CAULEY, RITA
805 EUCLID AVE
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PT
NAME MCCAULEY, RITA T
STREET ADDRESS 805 EUCLID AV
CITY-ST-ZIP ORLANDO, FL 32801

TITLE VS
NAME MCCAULEY, RITA M
STREET ADDRESS 805 EUCLID AV
CITY-ST-ZIP ORLANDO, FL 32801

TITLE V
NAME MCCAULEY, BERNARD
STREET ADDRESS 805 EUCLID AVE
CITY-ST-ZIP ORLANDO, FL 32801

TITLE V
NAME MCCAULEY, DESMOND
STREET ADDRESS 805 EUCLID AV
CITY-ST-ZIP ORLANDO, FL 32801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000785108
05/31/07-80022-022 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Rita McCauley Rita McCauley, May-14-07