

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # G95739

1. Entity Name
M. ANN GRAY, INC.



Principal Place of Business
**4631 ROYAL PALM BEACH BLVD
ROYAL PALM BEACH, FL 33411**

Mailing Address
**PO BOX 211675
ROYAL PALM BEACH, FL 33421**

DO NOT WRITE IN THIS SPACE



04182006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2422315

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GRAY, M. ANN
4631 ROYAL PALM BEACH BLVD
ROYAL PALM BEACH, FL 33411**

**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 reappointing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PSTD GRAY, M. ANN 4631 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411 |
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05/05/06-80041-020 150.00

**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 #

4/18/06