

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # J35079**

1. Entity Name  
**GRE SO FLA, INC.**



Principal Place of Business  
**191 W. NATIONWIDE BLVD.  
SUITE 200  
COLUMBUS, OH 43215-2568**

Mailing Address  
**191 W. NATIONWIDE BLVD.  
SUITE 200  
COLUMBUS, OH 43215-2568**



04112008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**31-1227404**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331**

**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  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

U000000917322  
05/13/08-80062-013 150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VTD  
CASTO, DON M., III  
191 W. NATIONWIDE BLVD., SUITE 200  
COLUMBUS, OH 432152568**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
BENSON, FRANK S., III  
191 W. NATIONWIDE BLVD., SUITE 200  
COLUMBUS, OH 432152568**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
CASTO, WILLIAM G.  
399 TAYLOR BLVD., #103  
PLEASANT HILL, CA 94523**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
BENSON, NANCY  
191 W. NATIONWIDE BLVD., SUITE 200  
COLUMBUS, OH 432152568**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
MORAN, ANN C  
191 W. NATIONWIDE BLVD., SUITE 200  
COLUMBUS, OH 432152568**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
WIBBELSMAN, NANCY B  
191 W. NATIONWIDE BLVD., SUITE 200  
COLUMBUS, OH 432152568**

**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

**DON M CASTO III**

**04/18/08**

Date

**614-228-5331**

Daytime Phone #