


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR)**

FILED
Apr 01, 2004 8:00 am
Secretary of State

04-01-2004 90218 037 ****55.00

DOCUMENT # L03000047719			
1. Entity Name GRAY POWER & CONTROLS L.L.C.			
Principal Place of Business 807 RUDOLPH ROAD LAKE WORTH FL 33461		Mailing Address 807 RUDOLPH ROAD LAKE WORTH FL 33461	
2. Principal Place of Business 807 Rudolph Rd.		3. Mailing Address Same	
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A	
City & State Lake Worth, FL		City & State FL	
Zip 33461	Country USA	Zip FL	Country FL
6. Name and Address of Current Registered Agent GRAY, DAVID A 807 RUDOLPH ROAD LAKE WORTH FL 33461			
7. Name and Address of New Registered Agent Name N/A Street Address (P.O. Box Number is Not Acceptable) N/A City FL Zip Code FL			
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 David Gray DATE 3-28-04 <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004			

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GRAY, DAVID A 807 RUDOLPH ROAD LAKE WORTH FL 33461 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: **David Gray** **David Gray** **3-28-04 (561-252-3055)**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #