

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000051768

FILED  
Mar 12, 2007  
Secretary of State

**Entity Name:** GRAYSTONE DEVELOPMENT SERVICES, LLC

**Current Principal Place of Business:**

1457 TWIN LEAF LANE  
OVIEDO, FL 32766

**New Principal Place of Business:**

**Current Mailing Address:**

1457 TWIN LEAF LANE  
OVIEDO, FL 32766

**New Mailing Address:**

**FEI Number:** 20-4916631

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PATTERSON, THOMAS L  
1457 TWIN LEAF LANE  
OVIEDO, FL 32766 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PATTERSON, THOMAS L  
Address: 1457 TWIN LEAF LANE  
City-St-Zip: OVIEDO, FL 32766

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PATTERSON, THOMAS L MR  
Address: 1457 TWIN LEAF LANE  
City-St-Zip: OVIEDO, FL 32766

Title: MGR ( ) Change (X) Addition  
Name: PATTERSON, TRACY N MRS  
Address: 1457 TWIN LEAF LANE  
City-St-Zip: OVIEDO, FL 32766

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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:** THOMAS L. PATTERSON

MGRM

03/12/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date