2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000115319

Entity Name: GRAY EMINENCE LLC

FILED Mar 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1154 GREENSTONE BLVD 1166 LEBANON CT

SANFORD, FL 32771 US **APT 106**

LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

1154 GREENSTONE BLVD 1166 LEBANON CT

APT 106 SANFORD, FL 32771 US LAKE MARY, FL 32746 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

CONE, HEATHER M CONE, HEATHER M 1154 GREENSTONE BLVD 1166 LEBANON CT US

SANFORD, FL 32771 APT 106 LAKE MARY, FL 32746 US

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: HEATHER M CONE 03/30/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change () Addition () Delete

CONE, HEATHER M CONE, HEATHER M Name: Name: 1154 GREENSTONE BLVD Address: 1166 LEBANON CT Address: City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: SCHMITT, CHRISTOPHE Name: SCHMITT, CHRISTOPHE

Address: 1154 GREENSTONE BLVD Address: 1166 LEBANON CT City-St-Zip: LAKE MARY, FL 32746 US City-St-Zip: SANFORD, FL 32771 US

Title: MGRM (X) Delete Title: () Change () Addition

BOUKARABILA, KARIM Name: Name: 3 RUE SOGER SALENDRO Address: Address: City-St-Zip: SAINT CHAMAS, PR 13250 FR City-St-Zip:

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: HEATHER M CONE **MGRM** 03/30/2007