

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L75894

Entity Name: WIN-GRAY, INC.

FILED
Sep 12, 2006
Secretary of State

Current Principal Place of Business:

104 63RD AVE. W.
BRADENTON, FL 34207 US

New Principal Place of Business:

1735 CHAPMAN HIGHWAY
SEVIERVILLE, TN 37876 US

Current Mailing Address:

12110 SPANISH MAIN RESORT TRAIL
THONOTOSASSA, FL 33592 US

New Mailing Address:

1735 CHAPMAN HIGHWAY
SEVIERVILLE, TN 37876 US

FEI Number: 65-0198781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURNER, JAMES L.
200 S ORANGE AVE
SARASOTA, FL 34230 US

Name and Address of New Registered Agent:

GRAY, SHERRI L
1735 CHAPMAN HIGHWAY
SEVIERVILLE, TN, FL 37876 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: SHERRI GRAY

09/12/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: WINTER, BETTY A.,
Address: 6343 HUMPHREY AVE
City-St-Zip: FLUSHING, MI

Title: P () Delete
Name: GRAY, SHERRI L.,
Address: 1735 CHAPMAN HWY
City-St-Zip: SEVIERVILLE, TN 37862

Title: V (X) Delete
Name: LUCAS ZANIBONI, KATHLEEN
Address: 12110 SPANISH MAIN RESORT TRL
City-St-Zip: THONOTOSASSA, FL 33592

Title: VS () Delete
Name: GRAY, WILLIAM A. S
Address: 1735 CHAPMAN HWY
City-St-Zip: SEVIERVILLE, TN 37862

Title: V () Delete
Name: GRAY, WILLIAM JR
Address: 1735 CHAPMAN HWY
City-St-Zip: SEVIERVILLE, TN 37862

Title: V () Delete
Name: GRAY, ANDREW A
Address: 1735 CHAPMAN HWY
City-St-Zip: SEVIERVILLE, TN 37862

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: WINTER, BETTY A.,
Address: 1735 CHAPMAN HIGHWAY
City-St-Zip: SEVIERVILLE, TN 37876

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERRI GRAY

PRES

09/12/2006

Electronic Signature of Signing Officer or Director

Date