2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # M02000002627

1. Entity Name
GRAY HOLDINGS, LLC

Principal Place of Business	Mailing Address
5004 MONUMENT AVE., SUITE 200 RICHMOND, VA 23230	5004 MONUMENT AVE., SUITE 200 RICHMOND, VA 23230

03202007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-1872713
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	STETTUNIUS, WALLACE
STREET ADDRESS	5004 MONUMENT AVENUE SUITE 200
CITY-ST-ZIP	RICHMOND, VA 23230
TITLE	MGR
NAME	GRAY, BRUCE B
STREET ADDRESS	5004 MONUMENT AVE., SUITE 200
CITY-ST-ZIP	RICHMOND, VA 23230
TITLE	MGR
NAME	GRAY, ELMON T
STREET ADDRESS	5004 MONUMENT AVE., SUITE 200
CITY-ST-ZIP	RICHMOND, VA 23230
TITLE	MGR
NAME	GRAY, GARLAND II
STREET ADDRESS	5004 MONUMENT AVE., SUITE 200
CITY-ST-ZIP	RICHMOND, VA 23230
TITLE	MGR
NAME	GRAY, HORACE A III
STREET ADDRESS	5004 MONUMENT AVE., SUITE 200
CITY-ST-ZIP	RICHMOND, VA 23230
TITLE	MGR
NAME	GRAY, LAWRENCE L
STREET ADDRESS	5004 MONUMENT AVE., SUITE 200
CITY-ST-ZIP	RICHMOND, VA 23230

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05/11/07-80045-004 50.00

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11. 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 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: H. Horace A. Gray, III 4/25/07 804/359-8444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #