
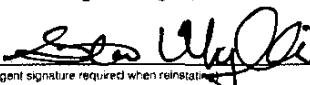



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90140 036 ***150.00

DOCUMENT # M16061 1. Entity Name THE GRAHAM COMPANIES					
Principal Place of Business 6843 MAIN STREET MIAMI LAKES, FL 33014			Mailing Address 6843 MAIN STREET MIAMI LAKES, FL 33014		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0127392	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRAHAM, WILLIAM E 6843 MAIN ST. MIAMI LAKES, FL 33014				7. Name and Address of New Registered Agent Name STUART S. WYLLIE Street Address (P.O. Box Number is Not Acceptable) 6843 MAIN STREET City MIAMI LAKES FL Zip Code 33014	
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 STUART S. WYLLIE - SENIOR EXEC VP  DATE APRIL 14, 2005 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C WILLIAM A. GRAHAM 6843 MAIN ST. MIAMI LAKES, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DSC STUART S. WYLLIE 6843 MAIN ST. MIAMI LAKES, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVCS RAWLS, ROBERT L. 6843 MAIN ST. MIAMI LAKES, FL 33014	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPC WILLIAM E. GRAHAM 6843 MAIN ST. MIAMI LAKES, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DEV MARTINEZ, ELIZABETH G. 6843 MAIN ST. MIAMI LAKES, FL 33014	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST FEATHERS, EDWIN E. 6843 MAIN STREET MIAMI LAKES, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  EDWIN E FEATHERS 4/18/05 305-817-4056 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

THE GRAHAM COMPANIES (FEI #65-0127392)

#M1606J

ATTACHMENT TO CORPORATION ANNUAL REPORT

40066515

D ☐ Delete ☐ Change ☐ Addition
Patricia C. Graham
6911 Main Street #225
Miami Lakes, Fl. 33014

D ☐ Delete ☐ Change ☐ Addition
Michael Beebe
24771 Penny Royal Drive
Bonita Springs, Fl. 34143

D ☐ Delete ☐ Change ☐ Addition
Gwendolyn G. Logan
2109 Ellicott Drive
Tallahassee, Fl. 32312

D/EV ☐ Delete ☐ Change ☐ Addition
Gerald E. Toms
7242 Loch Ness Drive
Miami Lakes, Fl. 33014

D/EV ☐ Delete ☐ Change ☐ Addition
Thomas N. Toms II
328 Avenue O
Moore Haven, Fl. 33471

D/EV ☐ Delete ☐ Change ☐ Addition
Carol G. Wyllie
6843 Main Street
Miami Lakes, Fl. 33014

D/EV ☐ Delete ☐ Change ☐ Addition
Luis O. Martinez
6843 Main Street
Miami Lakes, Fl. 33014

D/EV ☐ Delete ☐ Change ☐ Addition
Sandra G. Younts
6843 Main Street
Miami Lakes, FL 33014

D/EV ☐ Delete ☐ Change ☐ Addition
Evans J. Plowden, Jr.
320 Residence Avenue
Albany, GA 31702

ATTACHMENT 40066515
#M16061

AS
Robert S. Whitehead
6843 Main Street
Miami Lakes, FL 33014

☐ Delete ☐ Change ☐ Addition

D
D. Robert Graham
14814 Breckness Place
Miami Lakes, FL 33016

☐ Delete ☐ Change ☐ Addition

CFO
Andre L. Teixeira
6843 Main Street
Miami Lakes, FL 33014

☐ Delete ☐ Change ☐ Addition

AS
Linda C. Posey
320 Residence Avenue
Albany, GA 31702

☐ Delete ☐ Change ☐ Addition