

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009478

FILED
Feb 17, 2011
Secretary of State

Entity Name: GREAAATI INC.

Current Principal Place of Business:

1237 SW 109TH DR.
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

1237 SW 109TH DR.
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 37-1611917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TONEY, A. S
804 NW 16TH AVE.
B
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

PRATT, SANDRA N
1237 SW 109TH DR
GAINESVILLE, FL 32607 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: SANDRA N PRATT

02/17/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PRATT, SANDRA N
Address: 1237 SW 109TH DR
City-St-Zip: GAINESVILLE, FL 32607

Title: VP
Name: PRATT, SANDRA N
Address: 1237 SW 109TH DR.
City-St-Zip: GAINESVILLE, FL 32607

Title: S
Name: HUEGEL, CAROL A
Address: 3038 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: MCMULLEN, NANCY A
Address: 8528 SW 21ST LANE
City-St-Zip: GAINESVILLE, FL 32606

Title: D
Name: PRATT, KALEY M
Address: 1237 SW 109TH DR.
City-St-Zip: GAINESVILLE, FL 32607

Title: D
Name: JAMES, KATHLEEN C
Address: 1004 SW 113TH WAY
City-St-Zip: GAINESVILLE, FL 32607

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NANCY A MCMULLEN

D

02/17/2011

Electronic Signature of Signing Officer or Director

Date