

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
 05-28-2002 91622 013 ***155.00

0050750
 AV

DOCUMENT # P00000008667

1. Entity Name
GRAYTON OASIS, INC.

Principal Place of Business
54 LOGAN LANE
GRAYTON BEACH FL 32459

Mailing Address
54 LOGAN LANE
GRAYTON BEACH FL 32459

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3624733**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLEET, H. BART
1201 EGLIN PKWY
SHALIMAR FL 32579

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☒ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **EYER, LEE W**
 STREET ADDRESS **54 LOGAN LANE**
 CITY-ST-ZIP **GRAYTON BEACH FL 32459**

TITLE **ST** ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VSTD** ☒ Delete
 NAME **EYER, MEGHAN E**
 STREET ADDRESS **54 LOGAN LANE**
 CITY-ST-ZIP **GRAYTON BEACH FL 32459**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **EYER, LEE W II**
 STREET ADDRESS **54 LOGAN LANE**
 CITY-ST-ZIP **GRAYTON BEACH FL 32459**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **EYER, LINDA P**
 STREET ADDRESS **54 LOGAN LANE**
 CITY-ST-ZIP **GRAYTON BEACH FL 32459**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

attachment#



000000008667

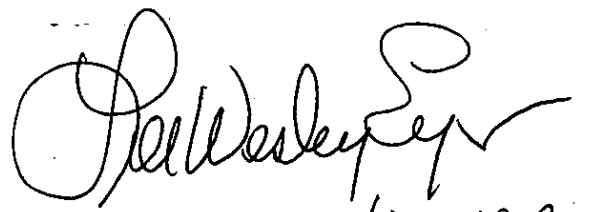
435889 MAY 10, 2002
GRAYTON BEACH

TO WHOM IT MAY CONCERN:

WE RECENTLY LOST OUR BAKER AND AS
A RESULT I HAD TO WORK 13 HOUR DAYS
IN THE BAKERY AND SOME OF MY PAPERWORK
GOT BEHIND.

ATTACHED IS MY CHECK FOR 155.00,
INCLUDING AN ELECTION CAMPAIGN CONTRIBUTION,
AND I REQUEST I BE FORGIVEN THE
PENALTY FOR LATE PAYMENT.

THANK YOU FOR
YOUR CONSIDERATION,


PRESIDENT/OWNER