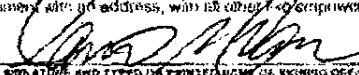


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000063968		
1. Entity Name THE GRAND BAY COMPANY, INC.		
Principal Place of Business 679 CELEBRATION AVE SUITE 549 CELEBRATION, FL 34747	Mailing Address 52 RILEY ROAD #205 CELEBRATION, FL 34747	
DO NOT WRITE IN THIS SPACE		
04242006 No Chg F CR2E034 (11/05) 4. FEI Number 59-3733207 Applied For (Not Applicable) 5. Current Date of Status Desired ☐ \$8.75 Additional Fee Required		
c. Name and Address of Current Registered Agent CANNELL, DANIEL R 1091 MAIDEN TERRACE CELEBRATION, FL 34747		DO NOT WRITE IN THIS SPACE
8. The above named entity takes on 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 Signature of person making application, if applicable (If Registered Agent, signature required when submitting) DATE		
FILE NOW! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
		U00000550867 05/13/06-80077-018 150.00
10. OFFICERS AND DIRECTORS		
OFFICER NAME CANNELL, DANIEL R 1091 MAIDEN TERRACE CELEBRATION, FL 34747	DO NOT WRITE IN THIS SPACE	
DIRECTOR NAME CANNELL, DANIEL R 1091 MAIDEN TERRACE CELEBRATION, FL 34747		
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DIRECTOR NAME CANNELL, DANIEL R 1091 MAIDEN TERRACE CELEBRATION, FL 34747		
12. I hereby certify that the information provided with this filing does not qualify for the exemptions provided in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementary report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent empowered to execute this report as required by Chapter 637, Florida Statutes, and that my name appears in Block "D" or Block "E" if a director, or as an authorized agent or address, with all other authorized persons.		
SIGNATURE: 		4/23/06
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Printed Name		