2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 08:00 AN
Secretary of State

DOCUMENT # P03000134485 1. Entity Name GARY GRAVES, INC.				,	Secre	tary of Sta
Principal Place of Business Mailing Address 1210 ALADDIN RD 1210 ALADDIN RD SPRING HILL, FL 34609 SPRING HILL, FL 34609						
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent			01112007 No Chg-P CR2E034 (11/05) 4. FEI Number			
GRAVES, GARY 1210 ALADDIN RD SPRING HILL, FL 34609		DO NOT WRITE IN THIS SPACE				
8. The above named entity submits this statement for the purpositive obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applies.		ed office or registe	·	oth, in the State of Flo	rida. I am far	niliar with, and accept
After May 1, 2007 Fee will be \$550.00	. Election Campaign Finan Trust Fund Contribution.		.00 May Be ted to Fees			
10. OFFICERS AND DIRECTOR TITLE D NAME GRAVES, GARY STREET ADDRESS 1210 ALADDIN RD CITY-SI-ZIP SPRING HILL, FL 34609 TITLE NAME STREET ADDRESS CITY-SI-ZIP	S			HODDO 01/15/07	0585901 -80031-	019 150. 00
TITLE NAME STREET ADDRESS GITY-SI-ZIP TITLE NAME STREET ADDRESS				NOT W THIS SF		
CITY-ST-ZIP HILE NAME STRELT ADDRESS CITY-ST-ZIP HYLE NAME						
STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling of indicated on this report or supplemental report is true and a of the corporation or the receiver or trustee empowered to echanged, or on an attachment with an address, with all other	execute this report as requir	amptions contained ture shall have the red by Chapter 60	d in Chapter 11: same legal effe 7, Florida Statut	9, Florida Statutes, I ct as if made under d es; and that my name	further certify path; that I am appears in I	that the information an officer or director Block 10 or Block 11 if