2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136854

Entity Name: GRAYSTONE OF FLORIDA INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

215 PINEDA STREET 718 SAVAGE CT

LONGWOOD, FL 32750 # 153

LONGWOOD, FL 32750

New Mailing Address: Current Mailing Address:

PO BOX 521666 LONGWOOD, FL 32752

FEI Number: 20-0446758 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NACKINO, PAUL C VP NACKINO, PAUL C PRES 215 PINEDA STREET 718 SAVAGE CT #153 LONGWOOD, FL 32750 US

LONGWOOD, FL 32750 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: PAUL C NACKINO 04/23/2007

> Electronic Signature of Registered Agent Date

> > Title:

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title:

VΡ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LAMBERT, RON NACKINO, PAUL C Name: Name: 215 PINEDA STREET # 153 718 SAVAGE CT Address: Address: City-St-Zip: LONGWOOD, FL 32750

LONGWOOD, FL 32750 City-St-Zip:

() Delete (X) Change () Addition NACKINO, PAUL C Name: Name: NACKINO, ANN 35 WINDSOR ISLE 718 SAVAGE CT Address: Address: LONGWOOD, FL 32779 LONGWOOD, FL 32750 City-St-Zip: City-St-Zip:

Title: Title: () Delete SECR () Change (X) Addition

Name: KATE, ALLEN Name: 718 SAVAGE CT Address: Address: City-St-Zip: City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL C NACKINO D 04/23/2007