

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000026637

1. Entity Name
PINKY GRAVLEY & SONS INC.



Principal Place of Business
25 WEST 2ND STREET
FROSTPROOF, FL 33843 US

Mailing Address
25 WEST 2ND STREET
FROSTPROOF, FL 33843 US

FILED
Jul 22, 2008 08:00 AM
Secretary of State



07162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0736721

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

GRAVLEY, LEON M
25 WEST 2ND STREET
FROSTPROOF, FL 33843

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRAVLEY, LEON M 25 WEST 2ND STREET FROSTPROOF, FL 33843
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRAVLEY, GREGORY A 301 N LAKE REEDY BLVD FROSTPROOF, FL 33843
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GRAVLEY, REGINALD S 15 WEST 2ND STREET FROSTPROOF, FL 33843
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000955733
07/22/08-80004-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leon M. Gravley*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-16-08
Date Daytime Phone #