FILED Mar 08, 2006 08:00 Secretary of Stat

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000026757 1. Entity Name MARY ANNE GRAY, P.A.							
Principal Place of Business Mailing Address 1647 W. GULF TO LAKE HWY 3507 S. DIAMOND AVENUE LECANTO, FL 34461 US INVERNESS, FL 34452 US				1 CHECKER C	ere wweste weber wwelle dweet	BORN BUNG RIVE &	in 1 221 2011 2011 2011 11
D	O NOT WRITE I	CE	03042006 4. FEI Numb 20-071	No Chg-P	CR2E0	34 (11/05) Applied For Not Applicable \$8.75 Additional Fee Regulred	
		DO NOT WRITE IN THIS SPACE					
 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							
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	neing \$5	.00 May Be led to Fees			}	
10.	OFFICERS AND DIRE	CTORS					
name Sireli address City St-Zip	GRAY, MARY A 3507 S. DIAMOND AVENUE INVERNESS, FL 34452	-					
DILE NAME STREET ADDRESS CHY-ST-ZIP	VP GRAY, GEORGE E III 3507 S. DIAMOND AVENUE INVERNESS, FL 34452		000000400287 03/20/06 80004-804 150.00				
Title Name Sirees address City-St-Zip					NOT V		ſ
title name street address city-st-zip			,	IN '	THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
JIJLE NAME STREET ADDRESS CITY-ST-ZIP						- -	
12. I hereby certify that the information supplied with this filling does not quality 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: WHO WHED OR PRINTED NAME OF PICER OR DIRECTOR 3/4/06 352 7464383							