

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000103753

Entity Name: GRAY PHLEBOTOMY, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

800 LOMAX STREET
SUITE 108
JACKSONVILLE, FL 32204

New Principal Place of Business:

4315 FALCON RUN LANE
MIDDLEBURG, FL 32068

Current Mailing Address:

POST OFFICE BOX 16952
JACKSONVILLE, FL 322456952

New Mailing Address:

FEI Number: 20-1465093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, ALICIA LEANN
800 LOMAX STREET
SUITE 108
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

GRAY, ALICIA LEANN
4315 FALCON RUN LANE
MIDDLEBURG, FL 32068 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: ALICIA L GRAY

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: GRAY, ALICIA LEANN
Address: 4315 FALCON RUN LANE
City-St-Zip: MIDDLEBURG, FL 32068

Title: VD () Delete
Name: GRAY, ALICIA LEANN
Address: 4315 FALCON RUN LANE
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALICIA L GRAY

PST

04/25/2005

Electronic Signature of Signing Officer or Director

Date