

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 8:00 am
Secretary of State

03-24-2008 90046 019 ***150.00

DOCUMENT # P05000024515					
1. Entity Name GREYSTONE RANCH, INC.					
Principal Place of Business 553 NE 205 AVE WILLISTON, FL 32696			Mailing Address 553 NE 205 AVE WILLISTON, FL 32696		
2. Principal Place of Business - No P.O. Box # 5400 NW 90th. Avenue		3. Mailing Address 2630 Sugarloaf Lane			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Ocala, Florida		City & State Ft. Lauderdale, Florida		4. FEI Number 05-0620907	
Zip 34482-1921		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 34482-1921		Country USA		6. Name and Address of Current Registered Agent VERBLE, VIVIAN 553 NE 205 AVE WILLISTON, FL 32696	
City & State Ocala, Florida		City & State Ft. Lauderdale, Florida		7. Name and Address of New Registered Agent Vivian Verble 2630 Sugarloaf Lane Ft. Lauderdale FL 33312-4636	
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 <u>X</u> DATE <u>X</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when revising)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERBLE, VIVIAN 553 NE 205 AVE WILLISTON, FL 32696 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Verble, Vivian 2630 Sugarloaf Lane Ft. Lauderdale, FL. 33312-4636 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERBLE, MARVIN 553 NE 205 AVE WILLISTON, FL 32696 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Verble, Marvin 2630 Sugarloaf Lane Ft. Lauderdale, FL. 33312-4636 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>X</u> <i>Vivian Verble</i>			Date <u>X 3-10-08</u> Daytime Phone # <u>954 327 2201</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					