2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000073611

ZANÉ GREY DEVELOPMENT COMPANY



FILED Mar 06, 2008 08:00 A Secretary of State

Principal Place of Business

11100 OVERSEAS HWY. MARATHON, FL 33050-3461 Mailing Address

11100 OVERSEAS HWY. MARATHON, FL 33050-3461



DO NOT WRITE IN THIS SPACE

02182008 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 20-3083381 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

DAUM, JOHN A 10512 SW 137TH PLACE MIAMI, FL 33186

DO NOT WRITE IN THIS SPACE

	·					
	named entity submits this statement for the plants of registered agent.	ourpose of changing its registe	ered office or re	egistered agent, or b	ooth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	il applicable. (NOTE: Registe	ered Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	\$ 1 t			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHMITT, BRIAN C 11100 OVERSEAS HWY. MARATHON, FL 330503461					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					16,3000 1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE			1, 1	ĮŃ.	THIS SPACE	

12. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS