

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000037979

Entity Name: GREYEAGLE, INCORPORATED

FILED
Apr 09, 2009
Secretary of State

Current Principal Place of Business:

208 ST. CLAIR DRIVE
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 877
HAZLEHURST, GA 31539

New Mailing Address:

FEI Number: 20-4906819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORRIS, R L
739 SCOLLUP DR SUITE 50
POART CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: MCALLISTER, JOSEPH S
Address: 90 SANDY FORD LANE
City-St-Zip: HAZLEHURST, GA 31539

Title: CFO () Delete
Name: HARPER, SHARON
Address: 112 WALTON WAY
City-St-Zip: HAZLEHURST, GA 31539

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 exemption stated 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 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: SHARON HARPER

CFO

04/09/2009

Electronic Signature of Signing Officer or Director

Date