

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000037979

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** GREYEAGLE, INCORPORATED

**Current Principal Place of Business:**

208 ST. CLAIR DRIVE  
COCOA, FL 32922

**New Principal Place of Business:**

739 SCOLLOP DR.  
SUITE 50  
PORT CANAVERAL, FL 32920

**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 (X)**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

NORRIS, R L  
739 SCOLLUP DR SUITE 50  
PORT CANAVERAL, FL 32920 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/27/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

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

Title: CFO  
Name: MCALLISTER, JOSEPH S  
Address: 90 SANDY FORD LN  
City-St-Zip: HAZLEHURST, GA 31539

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH S. MCALLISTER

CEO

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date