

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000107548

Entity Name: GRAY CONNECTIONS, INC.

**FILED**  
**Oct 12, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

4670 A1A SOUTH SUITE 1105  
ST. AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

4670 A1A SOUTH SUITE 1105  
ST. AUGUSTINE, FL 32080

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

GRAY, MITCHELL L  
4670 A1A SOUTH SUITE 1105  
ST. AUGUSTINE, FL 32080 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: MITCHELL L GRAY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PR ( ) Delete  
Name: GRAY, MITCHELL L  
Address: 4670 A1A SOUTH SUITE 1105  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: TR ( ) Delete  
Name: GRAY, DONNA M  
Address: 4670 A1A SOUTH SUITE 1105  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: SEC ( ) Delete  
Name: GRAY, DONNA M  
Address: 4670 A1A SOUTH SUITE 1105  
City-St-Zip: ST. AUGUSTINE, FL 32080

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: MITCHELL L GRAY

Electronic Signature of Signing Officer or Director

PRES

10/12/2009

Date