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Jan 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11883 (6)

1. Corporation Name
BILL GRAY'S, INC.

Principal Place of Business
P.O. BOX 323
WEBSTER NY 14580

Mailing Address
P.O. BOX 323
WEBSTER NY 14580-0323



3. Date Incorporated or Qualified 10/23/1986
3a. Date of Last Report 03/12/1996

4. FEI Number 16-0909818
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C	DELETE
NAME	HEGEDORN, BRUCE	
STREET ADDRESS	930 SHOEMAKER ROAD	
CITY - ST - ZIP	WEBSTER NY	
TITLE	MT	DELETE
NAME	GONZALEZ, JOHN	
STREET ADDRESS	635 TIMOTHY LANE	
CITY - ST - ZIP	WEBSTER NY	
TITLE	PD	DELETE
NAME	GRAY, DAN	
STREET ADDRESS	1030 LAKE ROAD	
CITY - ST - ZIP	WEBSTER NY	
TITLE	D	DELETE
NAME	HERMAN, KEITH	
STREET ADDRESS	647 BERG ROAD	
CITY - ST - ZIP	ONTARIO NY	
TITLE	D	DELETE
NAME	HEDGEDORN, BRIAN	
STREET ADDRESS	984 RIDGE ROAD	
CITY - ST - ZIP	WEBSTER NY	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	HEGEDORN, BRUCE	Change	Addition
1.2 NAME	635 TIMOTHY LANE		
1.3 STREET ADDRESS	WEBSTER, NY 14580		
1.4 CITY - ST - ZIP			
2.1 TITLE	GONZALEZ JOHN	Change	Addition
2.2 NAME	1030 LAKE RD.		
2.3 STREET ADDRESS	WEBSTER, NY 14580		
2.4 CITY - ST - ZIP			
3.1 TITLE	GRAY, DAN	Change	Addition
3.2 NAME	647 BERG ROAD		
3.3 STREET ADDRESS	ONTARIO, N.Y. 14519		
3.4 CITY - ST - ZIP			
4.1 TITLE	HERMAN, KEITH	Change	Addition
4.2 NAME	10 ESKEER RISE		
4.3 STREET ADDRESS	VICTOR, N.Y. 14564		
4.4 CITY - ST - ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/97

766714450

CR2E034 (9/96)