## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000006852

GRADY, PETER

8801 GATEHOUSE ROAD #1

PLANTATION, FL 33324

Name:

Address:

City-St-Zip:

Entity Name: GRADY MARINE SERVICES INC

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
	NDREWS AV	/ENUE						
#20 FT. LAUDI	ERDALE, FL	33316						
Current Mailing Address:					New Mailing Address:			
PO BOX 1 FT. LAUDI	5815 ERDALE, FL	33318	US		OX 15126 AUDERDAL	E, FL 33318	US	
FEI Number:	: 65-0720780	FEIN	lumber Applied For()	FEI Number No	ot Applicable (	) Certific	cate of Status Desired ( )	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
	OHN 1ST PLACE MANORS, FL	. 33311	US					
	named entit e of Florida.	y submits	s this statement for the	purpose of chan	ging its regis	stered office or	registered agent, or both,	
SIGNATUR	RE:							
	Electr	onic Sigr	ature of Registered Ag	ent			Date	
Election Car	npaign Financ	ing Trust I	Fund Contribution ( ).					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D GRADY, JOH 624 NW 21S WILTON MAI	T PLACE	33311	Title: Name: Addres City-S	ss:	()Change	( ) Addition	
Title:	D	( ) Delete		Title:	D	(X) Change	( ) Addition	

Name:

Address:

City-St-Zip:

GRADY, PETER

6941 NW 5TH COURT

PLANTATION, FL 33317

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: PETER GRADY D 04/29/2008