


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 08:00 AM
Secretary of State

DOCUMENT # S55667 1. Entity Name GREYSTONE HOMES, INC.	
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Principal Place of Business 5321 27 AVE NO ST. PETERSBURG, FL 33710 US	Mailing Address 5321 27 AVE NO ST. PETERSBURG, FL 33710 US
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01192008 No Chg-P CR2E034 (11/05)

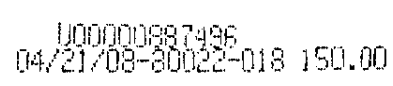
4. FEI Number 59-3074170	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
WISBY, KAREN K. 5321 27 AVE NO ST. PETERSBURG, FL 33710	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE PVT	 000000887496 04/21/08-80022-018 150.00
NAME WISBY, KAREN	
STREET ADDRESS 5321 27 AVE NO	
CITY-ST-ZIP ST. PETERSBURG, FL	
TITLE ST	
NAME WISBY, KAREN	
STREET ADDRESS 5321 27 AVE NO	
CITY-ST-ZIP ST. PETERBURG, FL	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen K Wisby President **4.5.08 727-439-0339**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #