2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # S58656

1. Entity Name
GREYFRIAR CAPITAL CORPORATION



FILED Apr 02, 2008 08:00 AN Secretary of State

Principal	Place of	f Bus	iness
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11260 OLD HARBOUR ROAD N. PALM BCH. FL 33408 US Malling Address

11260 OLD HARBOUR ROAD N. PALM BCH, FL 33408 US



03162008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0268557 Applied Fo

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HICKEY, JOSEPH M 11260 OLD HARBOUR RD. N. PALM BCH, FL 33408

CITY-ST-ZIP

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	named entity submits this statement for the pions of registered agent.	ourpose of changing its registered	office or	egistered agent, or b	oth, in the State of Florida. I am familiar with, and acc	
SIGNATURE.	Signature, typed or printed name of registered agent and title	Napplicable. (NOTE: Registered A	gent signatur	e required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ng 🗀	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRE	CTORS				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	PD HICKEY, JOSEPH M 11260 OLD HARBOUR ROAD NORTH PALM BEACH, FL			į	U00000877936 04/14/08-80034-007 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the informati-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 direct 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 changed, or on an attachment with an address, with all other like empowered.