

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S93161

FILED
Jan 08, 2008
Secretary of State

Entity Name: HARRY GRAY ASSOCIATES OF FLORIDA, INC.

Current Principal Place of Business:

11094 BEACH CLUB POINT
LOST TREE VILLAGE
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

30 STANFORD DR
FARMINGTON, CT 06032

New Mailing Address:

FEI Number: 65-0291224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
STE 105
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GRAY, HARRY J,
Address: 11094 BEACH CLUB PT LTV
City-St-Zip: N PALM BCH, FL

Title: S () Delete
Name: GRAY, HELEN B,
Address: 11094 BEACH CLUB PT LTV
City-St-Zip: N PALM BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RAYMOND S. WEINSTEIN

CPA

01/08/2008

Electronic Signature of Signing Officer or Director

_____ Date