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Feb 07 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 # V02597

(5)

1. Corporation Name
GREY EAGLE COACH, INC.

Principal Place of Business

2228 HWY 44 W
STE D-3
INVERNESS FL 34450
US

Mailing Address

P.O. BOX 2407
INVERNESS FL 34451-2407
US

3. Date Incorporated or Qualified
12/27/1991

3a. Date of Last Report
01/25/1996

2. Principal Place of Business

21 1123 Sterling Road

Suite, Apt. #, etc.

22 City & State
23 Inverness, FL

Zip

24 34450

Country

25 Citrus

2a. Mailing Address

26 1123 Sterling Road

Suite, Apt. #, etc.

27 City & State
28 Inverness, FL

Zip

29 34450

Country

30 Citrus

4. FEI Number

59-3100893

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

9. Name and Address of Current Registered Agent

ED LATTIN
2228 HWY 44 W
INVERNESS FL 34450

10. Name and Address of New Registered Agent

81 Name

Ed Lattin

82 Street Address (P.O. Box Number is Not Acceptable)

2575 Zellner Drive

83 Inverness, FL 34450

84 City

Inverness

FL

85 Zip Code
34450

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 P
NAME LATTIN, EDWIN F JR.
STREET ADDRESS 2575 ZELLNER DRIVE
CITY- ST- ZIP INVERNESS FL 34450 ☐ DELETE

TITLE ST
NAME STOKES, MARK A
STREET ADDRESS 1950 N.W. 16TH STREET
CITY- ST- ZIP CRYSTAL RIVER FL 34429 ☐ DELETE

TITLE V
NAME DOYLE, GRANT
STREET ADDRESS 3159 S HIAWASSEE TERRACE
CITY- ST- ZIP INVERNESS FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
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

Edwin F. Lattin, Jr., President 2/4/97 (352) 344-3589

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)