

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755718

FILED
Apr 13, 2009
Secretary of State

Entity Name: FLORIDA GREEN ALLIANCE, INC.

Current Principal Place of Business:

222-B WEST GEORGIA STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 11274
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-2051328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, MARLOW V
222 WEST GEORGIA ST
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

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: LEE, ROBERT F
Address: 7504 HOSFORD HWY
City-St-Zip: QUINCY, FL 32351

Title: D () Delete
Name: ALBRIGHT, GEORGE M
Address: 8977 S. E. 70TH TERRACE
City-St-Zip: OCALA, FL 33472

Title: VC () Delete
Name: BESHEARS, FRED H
Address: US HWY 19 SOUTH
City-St-Zip: MONTICELLO, FL 32344

Title: STD () Delete
Name: LEWIS, A EUGENE
Address: 222 W. GEORGIA ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: PHILLS, BOBBY R
Address: 2158 CHAIRES CROSS ROAD
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. EUGENE LEWIS

STD

04/13/2009

Electronic Signature of Signing Officer or Director

Date