

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001791

FILED
Apr 29, 2005
Secretary of State

Entity Name: GREEN CARD SERVICE, INC.

Current Principal Place of Business:

733 LANDOVER COURT
UNIT 104
NAPLES, FL 341047833

New Principal Place of Business:

Current Mailing Address:

4001 SANTA BARBARA BLVD.
PMB # 333
NAPLES, FL 341048808

New Mailing Address:

FEI Number: 65-0999203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLINAN, VINCENT A
733 LANDOVER CT., UNIT 104
NAPLES, FL 341047833 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: P/S () Delete
Name: HALLINAN, VINCENT A
Address: 733 LANDOVER COURT, # 104
City-St-Zip: NAPLES, FL 34104 US

Title: V/T () Delete
Name: HALLINAN, SUSANNA
Address: 733 LANDOVER COURT, # 104
City-St-Zip: NAPLES, FL 34104 US

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 for the exemption stated in Section 119.07(3)(i), 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: VINCENT HALLINAN

P/S

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date