


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 07, 2007 08:00 AM
Secretary of State**

DOCUMENT # P04000024557

1. Entity Name
GREENWOOD & ASSOCIATES EXECUTIVE SEARCH
AND CONSULTING, INC.



Principal Place of Business
42 BUSINESS CENTER DR. SUITE 307
MIRAMAR BEACH, FL 32550

Mailing Address
42 BUSINESS CENTER DR. SUITE 307
MIRAMAR BEACH, FL 32550

DO NOT WRITE IN THIS SPACE



01232007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0685960

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HELMICH, KEVIN M
4481 LEGENDARY DR
DESTIN, FL 32541

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GREENWOOD, JANET K
STREET ADDRESS	1503D NORTH COLONIAL TERR
CITY-ST-ZIP	ARLINGTON, VA 22209
TITLE	D
NAME	ASHER, BETTY T
STREET ADDRESS	740 INDIGO LOOP
CITY-ST-ZIP	DESTIN, FL 32550
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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03/16/07-80002-019 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty Asher 3-4-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #