

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS**

95 APR 26 AM 7:23

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000014590 (1)

1. Corporation Name

GREEN RESOURCES, INC.

Principal Place of Business

**2790 HEATHERWOOD COURT
CLEARWATER FL 34621**

Mailing Address

**2790 HEATHERWOOD COURT
CLEARWATER FL 34621**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/22/1994

3a. Date of Last Report

N/A

4. FBI Number

65-0532153

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

2. Principal Place of Business

21 8587 E GULF TO LAKE

2a. Mailing Address

26 508 PALMA CEIA PT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

22 INVERNESS FL

City & State

27 INVERNESS FL

Zip

24 34450 Country USA

Zip

29 34450 Country USA

9. Name and Address of Current Registered Agent

**GREEN, DONALD E
2790 HEATHERWOOD COURT
CLEARWATER FL 34621**

10. Name and Address of New Registered Agent

81 Name

SAME

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

508 PALMA CEIA PT

83

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 the if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**TITLE D
NAME GREEN, NATALIE
STREET ADDRESS 2790 HEATHERWOOD COURT
CITY-ST-ZIP CLEARWATER FL 34621**

**TITLE D
NAME GREEN, DONALD E
STREET ADDRESS 2790 HEATHERWOOD COURT
CITY-ST-ZIP CLEARWATER FL 34621**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP**

**PRESIDENT
NATALIE GREEN
508 PALMA CEIA PT
INVERNESS FL 34450**

**2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP**

**V. PRES
DONALD E. GREEN
508 PALMA CEIA PT
INVERNESS FL 34450**

**3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP**

**4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP**

**5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP**

**6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Natalie C. Green

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 (704) 637-2667

Typed

Telephone Number