2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 8:00 am
Secretary of State
04-15-2004 90004 018 ****61.25

DOCUMENT # N95000004578

1. Entity Name
GREEN HILLS COMMUNITY CENTER, INC.

Principal Place of Business	Mailing Address
17913 PARK PL. FOUNTAIN, FL 32438	P.O. BOX 284 FOUNTAIN, FL 32438

J12000100

01112004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-1617740
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GALANT, MARJORIE
782 S SILVERLAKE ROAD
FOUNTAIN, FL 32438

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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 Marjorie Galant 4-8-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KOERNER, GARY
STREET ADDRESS	17445 KOERNER RD
CITY-ST-ZIP	YOUNGSTOWN, FL
TITLE	V
NAME	MELLOR, FRED
STREET ADDRESS	15905 COUNTRY OAKS LN
CITY-ST-ZIP	FOUNTAIN, FL ~~32738~~ 32438
TITLE	T
NAME	GALANT, MARJORIE
STREET ADDRESS	782 S SILVER LAKE ROAD
CITY-ST-ZIP	FOUNTAIN, FL 32438
TITLE	S
NAME	HUNT, CHERYL
STREET ADDRESS	6080 ARD DRIVE
CITY-ST-ZIP	YOUNSTOWN, FL
TITLE	D
NAME	~~HERRELL, STEVE~~ Ross Ellis
STREET ADDRESS	~~12029 HARRINGTON ROAD~~ 17927 Park Place
CITY-ST-ZIP	~~FOUNTAIN, FL 32438~~ Fountain, FL 32438
TITLE	D Phyllis
NAME	BURGESS, ~~PHYLISS~~
STREET ADDRESS	12028 HARRINGTON RD
CITY-ST-ZIP	FOUNTAIN, FL 32438

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12. I 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 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 617, 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: Marjorie Galant 4-8-04 850-722-4651
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #