## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N1600007881

Entity Name: COMMUNITY GREENING CORP.

# **Current Principal Place of Business:**

610 SW 15TH AVE #4 DELRAY BEACH, FL 33444

# **Current Mailing Address:**

610 SW 15TH AVE #4 DELRAY BEACH, FL 33444 US

# FEI Number: 81-3559159

# Name and Address of Current Registered Agent:

FROMKNECHT, JEFFREY SIDE PROJECT INC. 2405 QUANTUM BLVD BOYNTON BEACH, FL 33426 US

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	: JEFFREY FROMKNECHT			04/26/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	DIR	Title	DIR	
Name	CASSINI, MARK	Name	CHARD, JAMES	
Address	610 SW 15TH AVE #4	Address	610 SW 15TH AVE #4	
City-State-Zip:	DELRAY BEACH FL 33444	City-State-Zip:	DELRAY BEACH FL 33444	
Title	DIR	Title	DIR	
Name	JACKSON, EMANUEL	Name	MCCOBB, JASON	
Address	610 SW 15TH AVE #4	Address	610 SW 15TH AVE #4	
City-State-Zip:	DELRAY BEACH FL 33444	City-State-Zip:	DELRAY BEACH FL 33444	
Title	DIR	Title	DIRECTOR	
Name	TYNES, ADRIENE	Name	NURGE, JEFF	
Address	610 SW 15TH AVE #4	Address	610 SW 15TH AVE #4	
City-State-Zip:	DELRAY BEACH FL 33444	City-State-Zip:	DELRAY BEACH FL 33444	
Title	DIRECTOR	Title	DIRECTOR	
Name	SHIPLEY, MATT	Name	QUINN, DANIELA	
Address	610 SW 15TH AVE #4	Address	610 SW 15TH AVE #4	
City-State-Zip:	DELRAY BEACH FL 33444	City-State-Zip:	DELRAY BEACH FL 33444	
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I hereby 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 all other like empowered.

SIGNATURE	: MARK CASSINI	DIRECTOR	04/26/2019
	Electronic Signature of Signing Officer/Director Detail		Date

# FILED Apr 26, 2019 Secretary of State 4210702221CC

Certificate of Status Desired: No

#### **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	PENDLETON-PARKER, CAROLYN
Address	610 SW 15TH AVE #4
City-State-Zip:	DELRAY BEACH FL 33444