

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000012609

**Entity Name:** THE GREENE FOUNDATION INC

**Current Principal Place of Business:**

4650 BAY BLVD.  
#1028  
PORT RICHEY, FL 34668

**Current Mailing Address:**

4650 BAY BLVD.  
#1028  
PORT RICHEY, FL 34668 US

**FEI Number:** 83-2736263

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROGERS, CHARLES A  
4650 BAY BLVD.  
#1028  
PORT RICHEY, FL 34668 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:** CHARLES ROGERS

02/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name ROGERS, CHARLES A  
Address 4650 BAY BLVD.  
#1028  
City-State-Zip: PORT RICHEY FL 34668

Title DIRECTOR  
Name KELL, JANINE A  
Address 4650 BAY BLVD.  
#1028  
City-State-Zip: PORT RICHEY FL 34668

Title SECRETARY  
Name JIM, STEWART  
Address 4650 BAY BLVD.  
#1028  
City-State-Zip: PORT RICHEY FL 34668

Title TREASURER  
Name NICOLAI, KAREN  
Address 4287 BELLAIRE DRIVE  
City-State-Zip: SPRING HILL FL 34607

Title DIRECTOR  
Name NUNEZ, ELOY A  
Address 4650 BAY BLVD.  
#1028  
City-State-Zip: PORT RICHEY FL 34668

Title DIRECTOR  
Name THOMAS, PATRICIA A  
Address 4650 BAY BLVD.  
#1028  
City-State-Zip: PORT RICHEY FL 34668

*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:** KAREN NICOLAI

**TREASURER**

02/05/2024

Electronic Signature of Signing Officer/Director Detail

Date