

2021 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

04/28/2021

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**

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date