

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 521093

FILED
Feb 23, 2009
Secretary of State

Entity Name: GREEN ACRES SPORTING GOODS, INC.

Current Principal Place of Business:

8774 NORMANDY BLVD.
JACKSONVILLE, FL 32221

New Principal Place of Business:

Current Mailing Address:

8774 NORMANDY BLVD.
JACKSONVILLE, FL 32221

New Mailing Address:

FEI Number: 59-1716512

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARHAT, JOHN Z PD
8774 NORMANDY BLVD.
JACKSONVILLE, FL 32221 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FARHAT, JOHN,
Address: 8774 NORMANDY BOULEVARD
City-St-Zip: JACKSONVILLE FL,

Title: VPT () Delete
Name: FARHAT, JEANETT Z.
Address: 8774 NORMANDY BLVD
City-St-Zip: JACKSONVILLE, FL

Title: DV () Delete
Name: FARHAT, ABIE,
Address: 8774 NORMANDY BLVD
City-St-Zip: JACKSONVILLE, FL

Title: VPS () Delete
Name: FARHAT, MAYSOON
Address: 497 MONTEREY PKWY
City-St-Zip: ORANGE PARK, FL 32073

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPS () Change (X) Addition
Name: FARHAT, JOHNNY
Address: 715 FREDERIC DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VPS () Change (X) Addition
Name: FARHAT, JACKIE
Address: 371097 KINGS FERRY ROAD
City-St-Zip: HILLIARD, FL 32046

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAYSOON FARHAT

VPS

02/23/2009

Electronic Signature of Signing Officer or Director

Date