

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 670693

1. Entity Name

GREENE CONSTRUCTION SERVICE, INC.

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90007 012 ***150.00

Principal Place of Business Mailing Address
2082 G.M.C. LANE 2082 G.M.C. LANE
CRESTVIEW FL 32536 CRESTVIEW FL 32536

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2025962

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GREENE, LONDON REX
2082 G.M.C. LANE
CRESTVIEW FL 32536

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	GREENE, LEON RICHARD	RT 6 BOX 77	CRESTVIEW FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STD	GREENE, LONDON REX	RT. 6 BOX 75	CRESTVIEW FL	<input type="checkbox"/>	<input type="checkbox"/>
VD	GREENE, LARRY RONALD	RT. 6 BOX 73	CRESTVIEW FL	<input type="checkbox"/>	<input type="checkbox"/>
D	GREENE, LEON ROBERT	RT. 6 BOX 75	CRESTVIEW FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LONDON REX GREENE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/00

Date

850 682 3881

Daytime Phone #