## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 708924** 

FILED Jan 06, 2003 Secretary of State

Entity Name: GREEN VALLEY COUNTRY CLUB, INC.

Current P	rincipal Place	of Business:	New Principal Place	e of Business:
W. HIGHW P O BOX 1 CLERMON				
Current Mailing Address:		New Mailing Address:		
W. HIGHW P O BOX 1 CLERMON				
FEI Number:	: 59-1095634	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
14731 GR	HOUSTON EEN VALLEY B IT, FL 34711	LVD US		
The above	named entity s	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
	e of Florida. RE:	·		
in the State	e of Florida. RE: Electroni	c Signature of Registered Age	ent	Date
in the State	e of Florida. RE:	c Signature of Registered Age	ent	
in the State	e of Florida.  RE: Electroni  S AND DIRECT	c Signature of Registered Age  CORS:  Delete EN S LOOP	ent	Date
in the State SIGNATUF  OFFICERS  Title: Name: Address:	e of Florida.  RE: Electroni  S AND DIRECT  T () ALEXANDER, KI 8540 SPYGLAS: CLERMONT, FL	c Signature of Registered Age ORS: Delete EN S LOOP 34711 Delete	ent  ADDITIONS/CHANC  Title:  Name:  Address:	Date SES TO OFFICERS AND DIRECTORS
in the State SIGNATUF  OFFICERS  Title: Name: Address: City-St-Zip:  Title: Name: Address:	E of Florida.  RE: Electroni  S AND DIRECT  T () ALEXANDER, KI 8540 SPYGLAS: CLERMONT, FL  D () LANGLEY, DICK P.O. BOX 12988 CLERMONT, FL	c Signature of Registered Age ORS: Delete EN S LOOP 34711 Delete 34712 Delete N Delete	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HOUSTON MELTON PRES 01/06/2003