



# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90209 004 \*\*\*\*61.25

<b>DOCUMENT # 722686</b> 1. Entity Name <b>EMERALD GREEN SECTION THREE, INC.</b>					
Principal Place of Business <b>3501 KEYSER AVE VILLA 31 HOLLYWOOD, FL 33021 US</b>			Mailing Address <b>USA SERVICES 6915 TAFT ST HOLLYWOOD, FL 33024 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>59-1464059</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>  <b>BLATTNER, RICHARD 3501 N. KEYSER AVE VILLA #48 HOLLYWOOD, FL 33021</b>			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HAUSFELD, CHARLES</b> <b>3501 KEYSER, # 41</b> <b>HOLLYWOOD, FL 33021</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>NAVARRO, JAMES</b> <b>3501 KOYSER AVE #42</b> <b>HOLLYWOOD, FL 33021</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>RICE, EUGENE</b> <b>3501 KEYSER AVE #43</b> <b>HOLLYWOOD, FL 33021</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>BLATTNER, RICHARD</b> <b>3501 KEYSER AVE #48</b> <b>HOLLYWOOD, FL 33021</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>KESSTAU, FRAN</b> <b>3501 KEYSER AVE, 34</b> <b>HOLLYWOOD, FL 33021</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>PEARSON, JULIAN MR</b> <b>3501 KEYSER AVE, # 32</b> <b>HOLLYWOOD, FL 33021</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>KESSEMAN, ABBEY</b> <b>3501 KEYSER AVE, 34</b> <b>HOLLYWOOD, FL 33021</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b>  <b>ABBEY KESSMAN</b> Date <b>4/26/2008</b> Daytime Phone # <b>305-389-6368</b>					

60035466



04242008 Chg-NP - CR2E037 (12/06)