

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 08:00 AM
Secretary of State

DOCUMENT # F00000005789

1. Entity Name
GREEN'S AIR CARE, INC.



Principal Place of Business
45 C CHRIS DRIVE
KINGSLAND, GA 31548

Mailing Address
45 C CHRIS DRIVE
KINGSLAND, GA 31548



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number
58-2161482

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TRANZHAN, MARTELL
1621 N. FLETCHER DRIVE
FERNANDINA BEACH, FL 32034

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

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

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
GREEN, JACK O
314 LONG POINT CIRCLE
ST. MARYS, GA 31548

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
GREEN, DAVID J
315 DEERWOOD CT.
SAINT MARYS, GA 31558

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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02/27/04-80032-009 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 10 or Block 11 if changed, or on an attachment with an address, with all other officers, were.

SIGNATURE:

Jack O. Green
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-04

912-882-3379