

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03515

FILED
Jan 20, 2006
Secretary of State

Entity Name: C. RAY GREENE, JR., TRUST, INC.

Current Principal Place of Business:

P.O. BOX 188
11514 EAST HWY. 316
FT. MCCOY, FL 32134

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 188
FT. MCCOY, FL 32134

New Mailing Address:

FEI Number: 59-6697288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, C. RAY, III
P O BOX 188
FT. MCCOY, FL 32134 US

Name and Address of New Registered Agent:

GREENE, C. RAY, III
11514 EAST HWY. 316
FT. MCCOY, FL 32134 US

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: C. RAY GREENE, III

01/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: GREENE III, C RAY,
Address: PO BOX 188
City-St-Zip: FT MCCOY, FL 32134

Title: P () Delete
Name: GREENE, JACK A,
Address: PO BOX 188
City-St-Zip: FT MCCOY, FL 32134

Title: VPD () Delete
Name: GREENE, WM BEDFORD,
Address: PO BOX 188
City-St-Zip: FT MCCOY, FL 32134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: GREENE III, C RAY,
Address: P O BOX 188
City-St-Zip: FT MCCOY, FL 32134

Title: P (X) Change () Addition
Name: GREENE, JACK A,
Address: P O BOX 188
City-St-Zip: FT MCCOY, FL 32134

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

I hereby certify that the information supplied with this filing does not qualify for the 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: C. RAY GREENE, III

STD

01/20/2006

Electronic Signature of Signing Officer or Director

Date