

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000971

FILED
Apr 20, 2005
Secretary of State

Entity Name: OLDCASTLE GREENLEAF, INC.

Current Principal Place of Business:

375 NORTHRIDGE ROAD, SUITE 350
ATLANTA, GA 30350

New Principal Place of Business:

38190 HIGHWAY 27
DAVENPORT, FL 32256

Current Mailing Address:

375 NORTHRIDGE ROAD, SUITE 350
ATLANTA, GA 30350

New Mailing Address:

375 NORTHRIDGE ROAD
SUITE 350
ATLANTA, GA 30350

FEI Number: 20-0176830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BLACK, DOUGLAS
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: DV () Delete
Name: O'SULLIVAN, PATRICK
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: P () Delete
Name: KOZIKOWSKI, TED
Address: 4150 W. TURNEY
City-St-Zip: PHOENIX, AZ 85019

Title: ST () Delete
Name: MAJHER, DAVID J
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: O'SULLIVAN, PATRICK
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: D/P (X) Change () Addition
Name: MASON, DON
Address: 38190 HIGHWAY 27
City-St-Zip: DAVENPORT, FL 32256

Title: S/T (X) Change () Addition
Name: MAJHER, DAVID J
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: AS () Change (X) Addition
Name: HICKMAN, GARY P
Address: 375 NORTHRIDGE RD, SUITE 350
City-St-Zip: ATLANTA, GA 30350

Title: D () Change (X) Addition
Name: MATTOX, JEFFREY A
Address: 9009 CORPORATE LAKE BLVD, SUITE 165
City-St-Zip: TAMPA, FL 33634

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY P. HICKMAN

AS

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date