## 2008 FOR PROFIT CORPORATION

## **ANNUAL REPORT**

DOCUMENT # F06000000903

GREEN BASES GOLFWORKS, INC

Apr 07, 2008 08:00 A Secretary of State

**FILED** 

Principal Place of Business

Mailing Address

19343 SW 100TH LOOP DUNNELLON, FL 34432 19343 SW 100TH LOOP DUNNELLON, FL 34432



	8  8  8     <b>6</b>   6   8 <b> </b>     8		
03292008	No Chg-P	CR2E034 (11/05)	

DO NOT WRITE IN THIS SPACE

Applied For 4. FEI Number 01-0669974 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 

Fee Required

6. Name and Address of Current Registered Agent

KESSENER, GARY 19343 SW 100TH LOOP DUNNELLON, FL 34432

10.

## DO NOT WRITE IN THIS SPACE

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				
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			

TITLE	DPS
NAME	KESSENER, GARY
STREET ADDRESS	19343 SW 100TH LOOP
CITY-ST-ZIP	DUNNELLON, FL 34432
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-7IP	
TITLE	
NAME	
STREET ADDRESS	
CHTY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE .	
NAME	

OFFICERS AND DIRECTORS

U00000884679 04/17/08-80053-016 150.00

DO NOT WRITE IN THIS SPACE

Date

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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an applicass, with all other like empowered.

SIGNATURE:

\*STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4305-395-3526