


**'2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 09, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # F89130 1. Entity Name HENRY N. GREENE, INC.	
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Principal Place of Business 4135 ESCONDITO CIRCLE SARASOTA, FL 34238 US	Mailing Address 4135 ESCONDITO CIRCLE SARASOTA, FL 34238 US
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01052006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2210888	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

BOYER, EDWIN M. ESQ  
~~46 NORTH WASHINGTON STREET~~ 6010 PATTERIDGE DR.  
 SUITE 102  
 SARASOTA, FL ~~34238~~ 34232

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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>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GREENE, HENRY N 4135 ESCONDITO CIRCLE SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GREENE, REID C/O TABS 100 EVERETT AVE STE 9 CHELSEA, MA 02150
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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000000379051  
 01/10/06-80006-013 150.00

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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 address, with all other like empowered.

SIGNATURE: Henry N. Greene 1/05/06 941-923-4990  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #