2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2008 8:00 am
Secretary of State
03-20-2008 90029 017 ***150.00

DOCUMENT # G11836

1. Entity Name

GREENBRIER VILLAGE, INC.

Principal Place of Business	Mailing Address
6100 62ND AVE N GREENBRIER VILLAGE OFFICE PINELLAS PARK FL 33781 US	6100 62ND AVE N GREENBRIER VILLAGE OFFICE PINELLAS PARK FL 33781 US

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2256150 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DUICH, JOAN E 6100 62ND AVE. N. #45 PINELLAS PARK FL 33781	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when changing it)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BELLEMARE, ROBERT 6100 62ND AVE NORTH #67 PINELLAS PARK FL 33781	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V EBERHART, ROBERT 6100 62ND AVE N #19 PINELLAS PARK FL 33781	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP V	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MILLER, ROBERT 6100 62ND AVE NORTH #26 PINELLAS PARK FL 33781	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP V-GENTRY, OTIS H. 6100-62ND AVE. N. #12 PINELLAS PARK, FL. 33781	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MORAN, MARJORIE 6100 62ND AVE NORTH #14 PINELLAS PARK FL 33781	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DUICH, JOAN E 6100 62ND AV N #45 PINELLAS PARK FL 33781	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOERKEL, ALWIN 6100 62ND AVE NORTH # 48 PINELLAS PARK FL 33781	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP D-LLOYD, ELAINE M. 6100-62ND AVE. N. #2 PINELLAS PARK, FL. 33781	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Joan E. Duich - Treasurer 3-8-08 727-546-8874
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #