

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H05103

FILED  
Jan 06, 2004  
Secretary of State

**Entity Name:** GREEN GLADES COUNTRY RANCHES, INC.

**Current Principal Place of Business:**

19612 SW 69 PLACE  
FT LAUDERDALE, FL 33332 US

**New Principal Place of Business:**

**Current Mailing Address:**

19612 SW 69 PLACE  
FT LAUDERDALE, FL 33332 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DE SAI, PHIL  
19612 S.W. 69TH PLACE  
FT. LAUDERDALE, FL 33332 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: PD ( ) Delete  
Name: BERGERON, RONALD M.,  
Address: 21111 S.W. 16TH ST.  
City-St-Zip: FT. LAUDERDALE, FL

Title: STD ( ) Delete  
Name: BERGERON, MARIE A  
Address: 5000 SW 195 TERRACE  
City-St-Zip: FT LAUDERDALE, FL 33332

Title: VD ( ) Delete  
Name: BERGERON, LONNIE T.,  
Address: 4839 S.W. 148TH AVENUE, SUITE 503  
City-St-Zip: FT. LAUDERDALE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: RONALD M BERGERON

PD

01/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date