

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H22522

FILED
Apr 14, 2005
Secretary of State

Entity Name: GREENE-HAZEL & ASSOCIATES, INC.

Current Principal Place of Business:

1301 RIVER PLACE RD.
2300
JACKSONVILLE, FL 32207 US

Current Mailing Address:

1301 RIVER PLACE BLVD.
2300
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

10739 DEERWOOD PARK BLVD.
200
JACKSONVILLE, FL 32256 US

New Mailing Address:

10739 DEERWOOD PARK BLVD.
200
JACKSONVILLE, FL 32256 US

FEI Number: 59-2447356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAZEL, THOMAS A.
1301 RIVERPLACE BLVD.
STE. 2300
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

HAZEL, THOMAS A.
10739 DEERWOOD PARK BLVD.
200
JACKSONVILLE, FL 32256 US

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:

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HAZEL, THOMAS A
Address: 1301 RIVERPLACE BLVD., STE. 2300
City-St-Zip: JACKSONVILLE, FL 32207

Title: STV () Delete
Name: GREENE-HAZEL, THERESA
Address: 1301 RIVERPLACE BLVD., STE. 2300
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Delete
Name: GREENE-HAZEL, THERESA
Address: 1301 RIVERPLACE BLVD., STE. 2300
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Delete
Name: OTTENSTROER, DUANE L. .
Address: 3683 CROWN POINT RD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: V (X) Delete
Name: HARDAKER, WILLIAM R.,
Address: 1301 RIVERPLACE BLVD., STE. 2300
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HAZEL, THOMAS A D
Address: 10739 DEERWOOD PARK BLVD. STE 200
City-St-Zip: JACKSONVILLE, FL 32256

Title: DPST (X) Change () Addition
Name: HAZEL, THERESA G DPST
Address: 10739 DEERWOOD PARK BLVD., STE 200
City-St-Zip: JACKSONVILLE, FL 32256

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: THOMAS A. HAZEL

D

04/14/2005

Electronic Signature of Signing Officer or Director

Date