

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

ORIGINAL
APR 11, 2008 08:00 AM
Secretary of State

DOCUMENT # H33276

1. Entity Name
GREEN ENTERPRISES OF PALM BEACH, INC.



Principal Place of Business
750 S. OLD DIXIE HWY
STE 9
JUPITER, FL 33458-7277 US

Mailing Address
750 S. OLD DIXIE HWY
STE 9
JUPITER, FL 33458-7277 US



01242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2496451

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GREEN, SHEILA M
UNIT 9 750 S OLD DIXIE HWY
JUPITER, FL 33458

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000892488
04/23/08-80069-001 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
GREEN SHELIA MARGARET
750 S OLD DIXIE HWY STE 9
JUPITER, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
GREEN, SIMON THOMAS
750 S OLD DIXIE HWY STE 9
JUPITER, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

S. M. Green, S.T.D.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.10.08.

Date

561-747-3010
Daytime Phone #