


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J82952</b> 1. Entity Name <b>GREEN CONSTRUCTION SERVICES, INC.</b>	
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Principal Place of Business <b>2525 DRANE FIELD RD STE 13 LAKELAND, FL 33813 US</b>	Mailing Address <b>2525 DRANE FIELD RD STE 13 LAKELAND, FL 33813 US</b>
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02172006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2826693</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

**GREEN, ALAN D.  
622 YOUNG PLACE  
LAKELAND, FL 33803**

**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 reappointing)

**3/10/06**  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GREEN, ALAN D. 622 YOUNG PLACE LAKELAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT GREEN, MICHAEL A. 6330 FORESTWOOD DR W LAKELAND, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000464998  
03/22/06-80019-002 150.00

**DO NOT WRITE  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/10/06** **863.465.**  
Date Daytime Phone #