

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K43238

Entity Name: GREEN DEVCO, INC.

FILED
Mar 28, 2006
Secretary of State

Current Principal Place of Business:

% THOMAS R. GREEN
5880 COMMERCE LANE
SOUTH MIAMI, FL 33143

Current Mailing Address:

% THOMAS R. GREEN
5880 COMMERCE LANE
SOUTH MIAMI, FL 33143

New Principal Place of Business:

% THOMAS R. GREEN
18001 OLD CUTLER ROAD #517
VILLAGE OF PALMETTO BAY, FL 33157

New Mailing Address:

% THOMAS R. GREEN
18001 OLD CUTLER ROAD #517
VILLAGE OF PALMETTO BAY, FL 33157

FEI Number: 65-0129716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, THOMAS R.
5880 COMMERCE LANE
SOUTH MIAMI, FL 33143 US

Name and Address of New Registered Agent:

GREEN, THOMAS R.
18001 OLD CUTLER ROAD #517
VILLAGE OF PALMETTO BAY, FL 33157 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:

03/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GREEN, NILDA L.,
Address: 3500 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL

Title: PSTD () Delete
Name: GREEN, THOMAS R.,
Address: 7490 SW 168TH ST.
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: GREEN, STEPHANIE
Address: 4920 SW 60 PLACE
City-St-Zip: MIAMI, FL 33155

Title: VD () Delete
Name: GREEN, JUAN R
Address: 3500 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: V () Delete
Name: SACKS, MICHAEL
Address: 17101 SW 79 CT
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PSTD (X) Change () Addition
Name: GREEN, THOMAS R.,
Address: 8802 SW 212 TERRACE
City-St-Zip: MIAMI, FL 33189

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 Chapter 119, 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 R. GREEN

PRES

03/28/2006

Electronic Signature of Signing Officer or Director

Date