

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K43238

Entity Name: GREEN DEVCO, INC.

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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.
18001 OLD CUTLER ROAD #517
VILLAGE OF PALMETTO BAY, FL 33157 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: D () Delete
Name: GREEN, NILDA L.,
Address: 3500 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL

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

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: PDST (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 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

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04/25/2007

Electronic Signature of Signing Officer or Director

_____ Date