2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N01000004220

Entity Name: GREENSONG GROVE, INC.

Current Principal Place of Business:

1590 79TH AVE N
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

1590 79TH AVE N
ST. PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 36-4454419 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KELLER, TERESA M
1590 79TH AVE N
ST. PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

HINES, TERESA M
1590 79TH AVE N
ST. PETERSBURG, FL 33702 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: TERESA M HINES 05/01/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PORTER, NANCY E
Address: 1315 26TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33703

Title: D ( ) Delete
Name: KELLER, TERESA M
Address: 1590 79TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D ( ) Delete
Name: AUGUSTINO, ANN MARIE
Address: 7139 62ND ST N
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: HINES, TERESA M
Address: 1590 79TH AVE N
City-St-Zip: ST. PETERSBURG, FL 33702

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA M HINES D 05/01/2006
Electronic Signature of Signing Officer or Director Date