

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 13, 2005
Secretary of State

DOCUMENT# N04000010111

Entity Name: GREEN BAY CHARITIES CO**Current Principal Place of Business:**4390 CR. 640 WEST
BARTOW, FL 33830**New Principal Place of Business:****Current Mailing Address:**4390 CR. 640 WEST
BARTOW, FL 33830**New Mailing Address:****FEI Number:** 20-1843137**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROWN, WALTER
4390 CR. 640 WEST
BARTOW, FL 33830 US**Name and Address of New Registered Agent:**PENNIX, LISA
4390 CR. 640 WEST
BARTOW, FL 33830 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: LISA PENNIX

10/13/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD (X) Delete
Name: BROWN, WALTER
Address: 4390 CR. 640 WEST
City-St-Zip: BARTOW, FL 33830**Title:** TD () Delete
Name: PENNIX, LISA
Address: 4390 CR. 640 WEST
City-St-Zip: BARTOW, FL 33830**Title:** V () Delete
Name: TURNER, SHEILA
Address: 4390 CR. 640 WEST
City-St-Zip: BARTOW, FL 33830**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** PD (X) Change () Addition
Name: PENNIX, LISA
Address: 4390 CR. 640 WEST
City-St-Zip: BARTOW, FL 33830**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 Section 119.07(3)(i), 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: LISA PENNIX

PD

10/13/2005

Electronic Signature of Signing Officer or Director

Date