

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000005728

FILED
May 07, 2009
Secretary of State

Entity Name: G.R.E.E.N. SRQ, INC.

Current Principal Place of Business:

5145 OCEAN BLVD.
SARASOTA, FL 34242

New Principal Place of Business:

4411 BEE RIDGE ROAD
SUITE 163
SARASOTA, FL 34233

Current Mailing Address:

5145 OCEAN BLVD.
SARASOTA, FL 34242

New Mailing Address:

4411 BEE RIDGE ROAD
SUITE 163
SARASOTA, FL 34233

FEI Number: 26-0343119 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

SHEA, JOHN J
269 SOUTH OSPREY AVENUE
SUITE 100
SARASOTA, FL 34236 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: JOHN J. SHEA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POWER, FELIX A
Address: 5145 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: D () Delete
Name: BRUNO, MICHAEL
Address: 5145 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: D () Delete
Name: FOSTER, DAVID G
Address: 130 NORTH TAMiami TRAIL
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: CROMWELL, DAVID
Address: 380 SUBSTATION ROAD
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: KNOSE, BILL
Address: 8830 SOUTH TAMiami TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: DARDAS, ROB
Address: 440 GULF OF MEXICO DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

SIGNATURE: BILL KNOSE

D

05/07/2009

Electronic Signature of Signing Officer or Director

Date