

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000007179

**FILED**  
**May 04, 2011**  
**Secretary of State**

**Entity Name:** GO FOR THE GREENS FOUNDATION, INC.

**Current Principal Place of Business:**

301 E. PINE ST., SUITE 150  
ORLANDO, FL 32801

**New Principal Place of Business:**

2014 EDGEWATER DRIVE  
ORLANDO, FL 32804

**Current Mailing Address:**

301 E. PINE ST., SUITE 150  
ORLANDO, FL 32801

**New Mailing Address:**

2014 EDGEWATER DRIVE  
ORLANDO, FL 32804

**FEI Number:** 45-0634297

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SCHICK, BETH  
1000 LEGION PLACE, SUITE 1700  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

SCHICK, BETH  
1000 LEGION PLACE, SUITE 1700  
UNIT 1715  
ORLANDO, FL 32801 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: \_\_\_\_\_

Electronic Signature of Registered Agent

05/04/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CHACE, CINDY  
Address: 2014 EDGEWATER DRIV  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: SEARS, DIANE  
Address: 2014 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: LAPORTA, MERCEDES  
Address: 2014 EDGEWATER DRIVE  
City-St-Zip: ORLANDO, FL 32804

I hereby 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 all other like empowered.

SIGNATURE: DIANE SEARS

MGR

05/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date