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NONPROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N47726

1. Corporation Name
GREENS/GREEN PARTY OF FLORIDA, INC.

Principal Place of Business
836 DEEDRA AVE
PENSACOLA FL 32514-1516
US

Mailing Address
THE GREEN PARTY OF FLORIDA
P.O. BOX 10294
PENSACOLA FL 32524-0294



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
03/06/1992

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-3132089

Applied For
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired \$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ARDIS, JOHNNY
836 DEEDRA AVE
PENSACOLA FL 32514

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Johnny Ardis* Johnny Ardis

4-25-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD DELETE
NAME BOONE, ANNA
STREET ADDRESS 3401 MILDRED DRIVE
CITY-ST-ZIP ZEPHYRHILLS FL

1.1 TITLE Change Addition
1.2 NAME D
1.3 STREET ADDRESS Dorothy Byrne
1.4 CITY-ST-ZIP 430 Bay St NE Apt 515
St Petersburg FL 33701-3039

TITLE D DELETE
NAME SOMMERVILLE, RICHARD
STREET ADDRESS 6170 82ND TERRACE NORTH
CITY-ST-ZIP PINELLAS PARK FL

2.1 TITLE Change Addition
2.2 NAME D
2.3 STREET ADDRESS Johnny Ardis
2.4 CITY-ST-ZIP 836 Deedra Ave
Pensacola FL 32514-1516

TITLE D DELETE
NAME ISRAEL, MARY
STREET ADDRESS 1317 N FEDERAL HWY, APT 1
CITY-ST-ZIP LAKE WORTH FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Johnny Ardis* JOHNNY ARDIS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-99

Date

850-474-1495
Daytime Phone #

CR2E037 (11/98)