

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

2007 SEP 14 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07142007 Chg-NP CR2E037 (12/06)

DOCUMENT # N95000004578 1. Entity Name GREEN HILLS COMMUNITY CENTER, INC.					
Principal Place of Business 17913 PARK PL. FOUNTAIN, FL 32438		Mailing Address P.O. BOX 284 FOUNTAIN, FL 32438			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1617740	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GALANT, MARJORIE 782 S SILVERLAKE ROAD FOUNTAIN, FL 32438			Name Street Address (P.O. Box Number is Not Acceptable) 200109597017 09/18/07--01071--013 **61.25 City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>[Signature]</i> DATE 9-13-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOERNER, GARY		NAME	JEFF Norton	
STREET ADDRESS	17445 KOERNER RD		STREET ADDRESS	13003 webber Rd	
CITY-ST-ZIP	YOUNGSTOWN, FL		CITY-ST-ZIP	FOUNTAIN, FL 32438	
TITLE	V	<input type="checkbox"/> Delete	TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MELLOR, FRED		NAME	DAVID WHITE	
STREET ADDRESS	15905 COUNTRY OAKS LN		STREET ADDRESS	P O BOX 215	
CITY-ST-ZIP	FOUNTAIN, FL 32738		CITY-ST-ZIP	FOUNTAIN, FL 32438	
TITLE	T	<input type="checkbox"/> Delete	TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALANT, MARJORIE		NAME	BUN TAYLOR	
STREET ADDRESS	782 S SILVER LAKE ROAD		STREET ADDRESS	P.O. BOX 149	
CITY-ST-ZIP	FOUNTAIN, FL 32438		CITY-ST-ZIP	FOUNTAIN FL 32438	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUNT, CHERYL		NAME	Marla clark	
STREET ADDRESS	6080 ARD DRIVE		STREET ADDRESS	10339 S. Silverlake Rd.	
CITY-ST-ZIP	YOUNGSTOWN, FL		CITY-ST-ZIP	FOUNTAIN, FL 32438	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MISSKERG, CYNTHIA		NAME	MELLOR FRED	
STREET ADDRESS	18735 WESTCHESTER RD		STREET ADDRESS	15905 COUNTRY OAKS LN.	
CITY-ST-ZIP	FOUNTAIN, FL 32438		CITY-ST-ZIP	FOUNTAIN FL 32738	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURGESS, PHYLLIS		NAME	CRAWFORD, DIANE	
STREET ADDRESS	12028 HARRINGTON RD		STREET ADDRESS	19740 ROSS RD	
CITY-ST-ZIP	FOUNTAIN, FL 32438		CITY-ST-ZIP	FOUNTAIN FL 32438	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> DATE 9-13-07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					