2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# P00000036040

Entity Name: GREENSCAPES OF INVERNESS, INC.

Current Principal Place of Business:

316 N JOHN YOUNG PARKWAY
SUITE 14
KISSIMMEE, FL 34741

New Principal Place of Business:

1577 N. FLORIDA AVENUE
HERNANDO, FL 34442

Current Mailing Address:

P.O. BOX 430401
KISSIMMEE, FL 34743

New Mailing Address:

1601 N. FLORIDA AVENUE
HERNANDO, FL 34442

FEI Number: 59-3638893 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IDEAL OPPORTUNITIES INC.
316 N JOHN YOUNG PARKWAY
SUITE 14
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

VAN DER VALK TOURS, INC.
1601 N. FLORIDA AVENUE
HERNANDO, FL 34442 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: CHRISTIAAN G MATSER 04/28/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: MATSER, CHRISTIAAN G
Address: 316 N JOHN YOUNG PARKWAY, SUITE 14
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete
Name: ELLIS, MATTHEW
Address: 316 N JOHN YOUNG PARKWAY, SUITE 14
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: MATSER, CHRISTIAAN G
Address: 1577 N. FLORIDA AVENUE
City-St-Zip: HERNANDO, FL 34442

Title: D (X) Change ( ) Addition
Name: ELLIS, MATTHEW
Address: 1577 N. FLORIDA AVENUE
City-St-Zip: HERNANDO, FL 34442

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

SIGNATURE: CHRISTIAAN G MATSER PSD 04/28/2008
Electronic Signature of Signing Officer or Director Date