

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084689

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** GREENACRE MANAGEMENT SYSTEMS, INC.

**Current Principal Place of Business:**

4131 GUNN HWY.  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

4131 GUNN HWY.  
TAMPA, FL 33618

**New Mailing Address:**

**FEI Number:** 04-3650557

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREENACRE, JEFFREY L  
4131 GUNN HWY  
TAMPA, FL 33618 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GREENACRE, JEFFREY L  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: T  
Name: GREENACRE, DONNA  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: S  
Name: WHITE, CINDY  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

Title: VP  
Name: GREENACRE, RYAN  
Address: 4131 GUNN HWY  
City-St-Zip: TAMPA, FL 33618

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

SIGNATURE: JEFFREY L GREENACRE

PD

04/19/2011

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

\_\_\_\_\_  
Date