


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 13, 2008 8:00 am**  
**Secretary of State**

02-13-2008 90020 012 \*\*\*158.75

<b>DOCUMENT # P01000085655</b> 1. Entity Name GREEN-GO GRASS COMPANY	
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Principal Place of Business 4485 S.W. 152 AVENUE MIRAMAR, FL 33027	Mailing Address 4485 S.W. 152 AVENUE MIRAMAR, FL 33027
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**DO NOT WRITE IN THIS SPACE**

02032008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1135167	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WOMACK, WILLIAM E  
4485 S.W. 152 AVENUE  
MIRAMAR, FL 33027

**DO NOT WRITE IN THIS SPACE**

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 William E. Womack William E. Womack 2/3/08  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES WOMACK, WILLIAM E 4485 S.W. 152 AVENUE MIRAMAR, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Kathleen E. Womack 4485 SW 152 AV. MIRAMAR, FL 33027
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 607, 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: William E. Womack 2/3/08 954 435 4285  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #