2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

37605 APIARY ROAD

GRAND ISLAND FL 32735-8900

P02000022588 **DOCUMENT #**

1. Entity Name GOT GREENS.COM, INC.

Principal Place of Business

GRAND ISLAND FL 32735-8900

37605 APIARY ROAD



FILED Jan 17, 2003 8:00 am Secretary of State

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2. Principal Place of Business		3. Malling Address		T TORINDAL THE ORDER THAIR SHALL BOWL ABOUT BOTH SHALL HOLD BUT BOWL THE TARGET BUT HOLD THE STATE OF THE STA	
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State		☐ CHECK HERE IF MAKING CHANGES	
				4. FEI Number	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional	
6.	Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent	
CARTER, KELLY 1202 OAK HAMM THE VILLAGES F	S MOCK LN	يسر يسم	Name Street Addre	ress (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	
SIGNATURE	d entity submits this statement for registered agent. e. typed or printed name of registered agent an		Is registered office or regis	gistered agent, or both, in the State of Florida. I am familiar with, and acc	cept
After May 1 Make Check Payab	OW!!! FEE IS \$150.00 1, 2003 Fee will be \$550.00 ble to Florida Department of \$	State		9. Election Campaign Financing \$5.00 May 1 Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND D		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
STREET ADDRESS 37941 CITY-ST-ZIP GRAND	INS-DAVEY, B.K. FLOWERTREE LANE D ISLAND FL 32735-8900	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	fition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of the empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

RE11y S. Carter

1/13/02

352-483-5670

Daytime Phone #