

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088656

FILED
Jan 10, 2009
Secretary of State

Entity Name: GREEN ACRES INVESTMENTS, INC.

Current Principal Place of Business:

12855 83RD ST.
FELLSMERE, FL 32948

New Principal Place of Business:

Current Mailing Address:

12855 83RD ST.
FELLSMERE, FL 32948

New Mailing Address:

FEI Number: 56-2288647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JERALD E SR.
12855-83ST
FELLSMERE, FL 32948 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: SMITH, JERALD E SR.
Address: 9302-125 AVE.
City-St-Zip: FELLSMERE, FL 32948

Title: D () Delete
Name: SCHULER SMITH, LAURA
Address: 9302-125 AVE.
City-St-Zip: FELLSMERE, FL 32948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SMITH, JERALD E SR.
Address: 12855 83RD STREET
City-St-Zip: FELLSMERE, FL 32948

Title: D (X) Change () Addition
Name: SCHULER SMITH, LAURA
Address: 12855 83RD STREET
City-St-Zip: FELLSMERE, FL 32948

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: JERALD.E.SMITH

PRES

01/10/2009

Electronic Signature of Signing Officer or Director

Date