2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000122801

Entity Name: GREENE VENTURES INC.

FILED Jan 07, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5190 NW HWY 441 OCALA, FL 34470 US

Current Mailing Address: New Mailing Address:

5190 NW HWY 441 OCALA, FL 34470 US

FEI Number: 04-3726406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TURNER, CRAIG W ESQ. 1531 SE 36TH AVE. SUITE OCALA, FL 34471 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:

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: () Delete Title: (X) Change () Addition GREENE, ANDREW S GREENE, ANDREW S Name: Name: 5190 N.W. HWY 441 5190 N.W. HWY 441 Address: Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: OCALA, FL 34475

Title: VS () Delete Title: VS (X) Change () Addition

 Name:
 GREENE, LYNN A
 Name:
 GREENE, LYNN A

 Address:
 13400 N.E. 7TH AVE.
 Address:
 5190 NW HWY 441

 City-St-Zip:
 ANTHONY, FL 32617 US
 City-St-Zip:
 OCALA, FL 34475 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDREW S. GREENE PT 01/07/2003