

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000143002

Entity Name: GREEN WOODS FARM, INC.

**FILED**  
**Feb 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

17495 SQUIRREL PRAIRIE RD  
SPRING HILL, FL 34604

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CAROLYN GREENWOOD  
10366 PALMGREN LN  
SPRING HILL, FL 34608

**New Mailing Address:**

FEI Number: 20-0492081

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GREENWOOD, CAROLYN  
10366 PALMGREN LN  
SPRING HILL, FL 34608 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: PST  
Name: GREENWOOD, CAROLYN  
Address: 17495 SQUIRREL PRAIRIE RD  
City-St-Zip: SPRING HILL, FL 34604

Title: V  
Name: GREENWOOD, SPENCER B  
Address: 17495 SQUIRREL PRAIRIE RD  
City-St-Zip: SPRING HILL, FL 34604

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: CAROLYN GREENWOOD

PST

02/03/2010

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

\_\_\_\_\_  
Date