

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156437

Entity Name: ARNETT C GREENE INC.

FILED  
Aug 10, 2006  
Secretary of State

## Current Principal Place of Business:

2737 EDGEWOOD AVE WEST  
JACKSONVILLE, FL 32209

## New Principal Place of Business:

## Current Mailing Address:

2737 EDGEWOOD AVE WEST  
JACKSONVILLE, FL 32209

## New Mailing Address:

FEI Number: 20-1891975

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREENE, ARNETT C  
2737 EDGEWOOD AVE WEST  
JACKSONVILLE, FL 32209 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: GREENE, ARNETT C  
Address: 2737 EDGEWOOD AVE  
City-St-Zip: JACKSONVILLE, FL 32209

Title: DIR ( ) Delete  
Name: GREENE, CLAUDETTE M  
Address: 2915 EDGEWOOD AVE W  
City-St-Zip: JACKSONVILLE L, FL 32209

Title: DIR ( ) Delete  
Name: GREENE, ALTON R  
Address: 530 STONERBRIAR WAY  
City-St-Zip: ATLANTA, GA 30331

Title: DIR ( ) Delete  
Name: DAWKINS, ARNIKA G  
Address: 3 CASCADE POINTE  
City-St-Zip: ATLANTA, GA 30331

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ARNETT C GREENE

PRES

08/10/2006

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

\_\_\_\_\_  
Date