## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000161630

Entity Name: GREEN APPLE ACADEMY, INC

FILED May 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4140 SW 70TH TERRACE DR. DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

4611 SOUTH UNIVERSITY DR, SUITE 406 DAVIE, FL 33314

FEI Number: 61-1478452 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:

STEVENS, FREDA 4611 S. UNIVERSITY DRIVE SUITE 406 DAVIE, FL 33328 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 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDST ( ) Delete Title: PDS (X) Change ( ) Addition

Name: STEVENS, FREDA Name: STEVENS, FREDA
Address: 4611 S UNIVERSITY DR #406 Address: 4611 S UNIVERSITY DR #406

City-St-Zip: DAVIE, FL 33328 City-St-Zip: DAVIE, FL 33328

OKY-01-21P. DAVIE, I E 33320 OKY-01-21P. DAVIE, I E 3332

Title: VP ( ) Delete Title: VPD (X) Change ( ) Addition

Name: STEVENS, DARIC Name: STEVENS, DARIC

Address: 4611 S UNIVERSITY DR #406 Address: 4611 S UNIVERSITY DR #406

City-St-Zip: DAVIE, FL 33328 City-St-Zip: DAVIE, FL 33328

Title: T ( ) Delete Title: TD (X) Change ( ) Addition

Name:SHERMAN, CLEMENTINEName:SHERMAN, CLEMENTINEAddress:17024 NW 20TH STREETAddress:17024 NW 20TH STREETCity-St-Zip:PEMBROKE PINES, FL 33028City-St-Zip:PEMBROKE PINES, FL 33028

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: /FREDASTEVENS/ PDS 05/14/2009