

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2007 8:00 am**  
**Secretary of State**

03-06-2007 90004 007 \*\*\*150.00

**DOCUMENT # P05000076310**

1. Entity Name  
**FILLETTE, GREEN SHIPPING SERVICES (SOUTHEAST)  
CORP.**



Principal Place of Business  
**3333 W KENNEDY BLVD., SUITE 207  
TAMPA, FL 33609 US**

Mailing Address  
**3333 W KENNEDY BLVD., SUITE 207  
TAMPA, FL 33609 US**

**40029970**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01112007

Chg-P

CR2E034 (12/06)

4. FEI Number

**59-0241810**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VONSPIEGELFELD, ALLEN  
501 E KENNEDY BLVD SUITE 1700  
TAMPA, FL 33602**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME PUNDSACK, CHRISTIAN  
STREET ADDRESS 3333 W KENNEDY BLVD., SUITE 207  
CITY-ST-ZIP TAMPA, FL 33609

TITLE D ☐ Change ☒ Addition  
NAME DERRICK N. THOMAS  
STREET ADDRESS 12605 EAST FREEWAY SUITE 506  
CITY-ST-ZIP HOUSTON TX 77015

TITLE STD ☐ Delete  
NAME MARTIN, DENNIS  
STREET ADDRESS 3333 W KENNEDY BLVD., SUITE 207  
CITY-ST-ZIP TAMPA, FL 33609

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME PUNDSACK, ROBERT N  
STREET ADDRESS 3333 W KENNEDY BLVD., SUITE 207  
CITY-ST-ZIP TAMPA, FL 33609

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

**ROBERT N. PUNDSACK**

**3/2/07**

**813 348 1481**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #