2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020029

2599 SE 31 AVE

OCALA, FL 34471

Address: City-St-Zip:

Entity Name: MASTER GREENS OF OCALA INC.

FILED Jan 16, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
2203 SE 2 OCALA, F							
Current Mailing Address:				New Mailing Address:			
2203 SE 2 OCALA, F							
FEI Number	: 26-0134674	FEI Number A	pplied For()	FEI Number Not Appl	icable ()	Certificate of Status De	sired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
VITALE, B 2203 SE 2 OCALA, F	8 PLACE	US					
	named ent e of Florida.		atement for the pu	ırpose of changing i	ts registered	l office or registered age	ent, or both,
SIGNATUI	RE:						
	Elec	tronic Signature of	Registered Ager	nt		Date	
Election Car	mpaign Finan	cing Trust Fund Cor	ntribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	O VITALE, BO 2203 SE 28 OCALA, FL	PLACE		Title: Name: Address: City-St-Zip:	•	()Change ()Addition	
Title: Name: Address: City-St-Zip:	O GRAHAM, J 1955 SE 34 OCALA, FL	ST		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	O GRAHAM, F	() Delete PATRICK		Title: Name:	O GRAHAM, PA	(X) Change()Addition	

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.

Address:

City-St-Zip:

3920 SE 48 STREET

OCALA, FL 34480

SIGNATURE: BONNIE A. VITALE PRE. 01/16/2008