

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P06000073907

1. Entity Name

GREENWAY CAPITAL ENTERPRISE, INC



FILED
Apr 05, 2007 8:00 am
Secretary of State

04-05-2007 90148 011 ***158.75

Principal Place of Business
138 E COLONIAL DR
ORLANDO FL 32801

Mailing Address
138 E COLONIAL DR
ORLANDO FL 32801



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

1200 Hillcrest St.

Suite, Apt. #, etc.

Suite 202

City & State

Orlando FL

Zip

32803

Country

USA

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

32803

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number

20-4951451

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NGUYEN, THU P
138 E COLONIAL DR
ORLANDO FL 32801

7. Name and Address of New Registered Agent

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 reconstituting)

DATE

3-27-07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	NGUYEN, THU P	
STREET ADDRESS	138 E COLONIAL DR	
CITY- ST- ZIP	ORLANDO FL 32801	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	YATES, WENDELL N	
STREET ADDRESS	138 E COLONIAL DR	
CITY- ST- ZIP	ORLANDO FL 32801	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thu P. Nguyen 3-27-07 407-733-3554

Date

Daytime Phone #