

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P06000090724

1. Entity Name
IT'S A GREEN THING, INC.



**FILED
May 02, 2007 8:00 am
Secretary of State**

05-02-2007 90076 012 ***150.00

40099615



05012007 Chg-P CR2E034 (12/06)

4. FEI Number 06-1785234	Applied For Not Applicable
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5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

DUNHAM, LINDA
5507 SE 111TH STREET
BELLEVIEW, FL 34420

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

TITLE: PST
NAME: BLANKENSHIP, BETSY
STREET ADDRESS: PO BOX 2468
CITY-ST-ZIP: BELLEVIEW, FL 34421

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Change Addition

TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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: Betsy Blankenship **BETSY BLANKENSHIP 5-1-07 352-551-0219**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #