

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90063 037 ***150.00

DOCUMENT # P07000037662					
1. Entity Name GREEN ISLAND MARITIME, INC.					
Principal Place of Business 232A NORTH 2ND STREET FERNANDINA BEACH, FL 32034			Mailing Address 232A NORTH 2ND STREET FERNANDINA BEACH, FL 32034		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 9000 West 67th Street			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Attn: Tax Department			
City & State		City & State Merriam, KS		4. FEI Number 20-8743774	
Zip		Country 66202 US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D	NAME BRESKY, STEVEN J		<input type="checkbox"/> Delete	TITLE Change	<input type="checkbox"/> Addition
STREET ADDRESS 9000 WEST 67TH STREET STE 300	CITY-ST-ZIP MERRIAM, KS 66202				
TITLE D	NAME STEERY, ROBERT L		<input type="checkbox"/> Delete	TITLE V/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 9000 WEST 67TH STREET STE 300	CITY-ST-ZIP MERRIAM, KS 66202		NAME Steer, Robert L. 9000 West 67th St., STE 300 Merriam, KS 66202		
TITLE DV	NAME GONZALEZ, EDWARD A		<input type="checkbox"/> Delete	TITLE P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 8001 NW 79TH AVE	CITY-ST-ZIP MIAMI, FL 33166		NAME Gonzalez, Edward A. 8001 NW 79th Ave Miami, FL 33166		
TITLE DP	NAME BRECHEISEN, BRUCE A		<input type="checkbox"/> Delete	TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 8001 NW 79TH AVE	CITY-ST-ZIP MIAMI, FL 33166		NAME Brecheisen, Bruce A. 8001 NW 79th Ave Miami, FL 33166		
TITLE V	NAME CROUTCH, WILLIAM H		<input type="checkbox"/> Delete	TITLE V/assistant secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 8001 NW 79TH AVE	CITY-ST-ZIP MIAMI, FL 33166		NAME Crouch, William H. 8001 NW 79th Ave. Miami, FL 33166		
TITLE VS	NAME BECKER, DAVID M		<input type="checkbox"/> Delete		
STREET ADDRESS 9000 WEST 67TH STREET	CITY-ST-ZIP MERRIAM, KS 66202				
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 Steer		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 3/31/08 Daytime Phone #: (913) 676-8800		