

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000069809

FILED  
Mar 21, 2012  
Secretary of State

Entity Name: GREEN ROOM STUDIOS, INC.

**Current Principal Place of Business:**

8699 EGRET ISLE TERRACE  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

8699 EGRET ISLE TERRACE  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

FEI Number: 77-0689587

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SIMMONS, CAROLE D  
8699 EGRET ISLE TERR.  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SIMMONS, WENDELL  
Address: 8699 EGRET ISLE TERRACE  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: VP  
Name: SIMMONS, CAROLE  
Address: 8699 EGRET ISLE TERRACE  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: S  
Name: SIMMONS, WENDELL  
Address: 8699 EGRET ISLE TERRACE  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: T  
Name: SIMMONS, CAROLE  
Address: 8699 EGRET ISLE TERRACE  
City-St-Zip: LAKE WORTH, FL 33467 US

I hereby 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 all other like empowered.

SIGNATURE: CAROLE SIMMONS

VP

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date