

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000051861

FILED
Jun 09, 2009
Secretary of State

Entity Name: GREEN DAY CAFE CORPORATION

Current Principal Place of Business:

1022 W SMITH STREET
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

1022 W SMITH STREET
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 80-0190412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMLINSON, CHAD
3500 WILDER LANE
ORLANDO, FL 32804 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TOMLINSON, CHAD
Address: 3500 WILDER LANE
City-St-Zip: ORLANDO, FL 32804

Title: T () Delete
Name: TOMLINSON, JOSEPH
Address: 3500 WILDER LANE
City-St-Zip: ORLANDO, FL 32804

Title: VPD () Delete
Name: TOMLINSON, TERI
Address: 3500 WILDER LANE
City-St-Zip: ORLANDO, FL 32804

Title: S () Delete
Name: WALTERS, HEIDI
Address: 501 RIVIERA DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S () Delete
Name: MAIN, KIERSTEN
Address: 2817 SALISBURY BLVD
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: TERI TOMLINSON

VPD

06/09/2009

Electronic Signature of Signing Officer or Director

_____ Date