## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P34322

FILED Sep 06, 2002 Secretary of State

Entity Name: GREENMAN TECHNOLOGIES OF GEORGIA, INC.

Current Principal Place of Business:			New Principal Place of Business:		
138-B SHE JACKSON,		US			
Current Mailing Address:			New Mailing Address:		
138-B SHE JACKSON,		US			
FEI Number:	58-2324483	FEI Number Applied For ( ) FEI Num	nber Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name				Address of New Registered Agent:	
CORPORATION SERVICE COMPANY					
1201 HAYS STREET TALLAHASSEE, FL 32301 US					
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					
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () BOYD, LEW F 7 KIMBELL LAN LYNN FIELD, M		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition THOMAS, CARTER 7 KIMBALL LANE LYNN FIELD, MA 01940	
Title: Name: Address: City-St-Zip:	D () NEEDHAM, MAU 7 KIMBELL LAN LYNN FIELD, M	E	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MAUST, MARK 7 KIMBALL LANE LYNN FIELD, MA 01940	
Title: Name: Address: City-St-Zip:	P () DAVIS, ROBER 7 KIMBELL LAN LYNN FIELD, M	E	Title: Name: Address: City-St-Zip:	P,D (X) Change ( ) Addition DAVIS, ROBERT H 7 KIMBELL LANE LYNN FIELD, MA	
Title: Name: Address: City-St-Zip:	T () COPPA, CHARL 7 KIMBELL LAN LYNN FIELD, M	ES E E	Title: Name: Address: City-St-Zip:	T,D (X) Change ( ) Addition COPPA, CHARLES E 7 KIMBALL LANE LYNN FIELD, MA 01940	
Title: Name: Address: City-St-Zip:	D () OZA, JAGRUTI 7 KIMBALL LN LYNNFIELD, MA	Delete	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition BRAD, HUGHES 7 KIMBALL LN LYNNFIELD, MA 01940	
Title: Name: Address: City-St-Zip:	D () JONES, DAVID C/O GUT OF G/ LYNNFIELD, M/		Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition RAHNI, BAHR 7 KIMBALL LANE LYNNFIELD, MA 01940	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES E COPPA T 09/06/2002