FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanora B. Mortnam Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT #

1. Corporation Name

P92000006350 (2)

GREE	INSPORT, INC.						
Principal Place	e of Business	Mailing Address				i domi obili balik onido)
6601 N. DA SUITE EF PENSACOLI	IVIS HIGHWAY	6601 N. DAVIS HIGHW Suite ef Pensacola fl 32504	AY				
US	A 12 02004	US			 Date Incorporated or Qualified 11/19/1992 	3a. Date of Last 06/07/1	
2. Principal Pi	lace of Business	2a, Maling Address			4. FEI Number		Applied For
21		26			59-3153077		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	1 7 -	'5 Additional Required
City & State 28		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Coun	try	8. This corporation has liability for it	ntangible tax under	s 199.032,
24	25	29	30		: Florida Statutes : Yes		
*	 Name and Address of Currer 	t Registered Agent			10. Name and Address of New R	egistered Agent	
			8	Name			
	ATRE, THOMAS G JR		ε	Street A	Address (P.O. Box Number is Not Acceptable	le)	
	BAYOU BLVD.		-	33			
SUITE				53			
PENSA	ICOLA FL 32503		Ē	4 City		FL 85	Zip Code
or register		da. Such change was authorize			rperation submits this statement for the purposed of directors. Thereby accept the appoint	pose of changing its	
SIGNATURE	Signal ire typed or printed name of regoldered agent	and the Capping will	: Akydorei A	ger i Saprat neces	syund al external stagi	ĐA' E	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		
TITLE	PD PD	☐ DELETE	3 TH	1		☐ Change	e 🔲 Addition
NAME	GREEN, NORMAN R		1.2 NAM				
STREET ADDRESS	3154 BENTON BLVD.			EEL ADDRESS			ļ!
CITY - ST - ZIP	PACE FL 32571 STD	[7] DELETE		· ST · ZIP		Change	
T!TLE	GREEN, JEAN A		2 1 1 1	1		☐ Change	e 🔲 Addition 📑
NAME CERTEX ADDOCUS	3154 BENTON BLVD.		2.2 NAM				
STREET ADDRESS	PACE FL 32571			EET ADDRESS			
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NAME			3 2 NAV	1			
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TITLE		☐ DELFT !	5 1 11			☐ Change	e 🔲 Addition
NAME			5.2 NAN	16			
STREET ADDRESS			5.3 STB	ELT ADDRESS			Ì
CITY - ST - ZIP			5.4 CHY	ST . 71P			
TITLE		DEFELE	6 1 T lT	.t		☐ Change	e 🔲 Addition
NAME			6.2 NAM	AE.			
STREET ADDRESS			63 STA	EET ADDRESS			
CITY - ST - ZIP			6.4 CIT	r-ST-ZIP			

64 CITY- \$1-2IP

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119 07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 it changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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