

DOCUMENT # P93000041535

GREENE RIVER MARKETING, INC.



US

FILED Feb 01, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

6920 N US #1

VERO BEACH, FL 32967 US

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VERO BEACH, FL 32967

01152008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3188583

Not Applicable

Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

GRIFFIN A. GREENE 2075 38TH AVE. VERO BCH, FL 32960

DO NOT WRITE IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

	., .,	
10.	OFFICERS AND DIREC	CTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENE, GRIFFIN A 2075 38TH AVE. VERO BEACH, FL 329602450	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JANIE E. GREENE 2075 38TH AVE. VERO BEACH, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENE, BARNETTE E 2075 38TH AVE. VERO BEACH, FL 329602450	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HARIOT, GREENE 2075 38TH AVE VERO BEACH, FL 32960	
NAME STREET ADDRESS CITY-SI-ZIP		
19. I hereby cortify that the information symplied with this filing does not availfy for the ex-		

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DO NOT WRITE IN THIS SPACE

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:

IGNATURE AND TWED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/08 778-4

Daytime Phone #