

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000043547

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: GREENE RIVER PACKING, INC.

**Current Principal Place of Business:**

6920 N US 1  
VERO BEACH, FL 32967 US

**New Principal Place of Business:**

**Current Mailing Address:**

6920 N US 1  
VERO BEACH, FL 32967 US

**New Mailing Address:**

FEI Number: 65-0587579      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RODGERS, JOHN P  
Address: 1976 SURFSIDE TER  
City-St-Zip: VERO BEACH, FL 32963

Title: DVP ( ) Delete  
Name: GREENE, GRIFFIN A  
Address: 2075 - 38TH AVENUE  
City-St-Zip: VERO BEACH, FL 329602450

Title: DS ( ) Delete  
Name: JANIE E. GREENE,  
Address: 2075 - 38TH AVENUE  
City-St-Zip: VERO BEACH, FL

Title: D ( ) Delete  
Name: GREENE, BARNETTE E  
Address: 2075 - 38TH AVENUE  
City-St-Zip: VERO BEACH, FL 329602450

Title: DT ( ) Delete  
Name: GREENE, HARIOT H  
Address: 2075 38TH AVENUE  
City-St-Zip: VERO BEACH, FL 32960

**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: GRIFFIN A. GREENE

DVP

01/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date