

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052734

Entity Name: C.L. GREENE HOLDINGS, INC.

FILED  
Apr 20, 2005  
Secretary of State

## Current Principal Place of Business:

378 W BAY ST  
WINTER GARDEN, FL 34787 US

## New Principal Place of Business:

505 N. BOYD STREET  
WINTER GARDEN, FL 34787 US

## Current Mailing Address:

678 W BAY ST  
WINTER GARDEN, FL 34787 US

## New Mailing Address:

505 N. BOYD STREET  
WINTER GARDEN, FL 34787 US

FEI Number: 59-3370730

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GREENE, C L  
678 W BAY ST  
WINTER GARDEN, FL 34787 US

## Name and Address of New Registered Agent:

GREENE, C L  
505 N. BOYD STREET  
WINTER GARDEN, FL 34787 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:

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: GREENE, CLAUDE  
Address: 678 W BAY ST  
City-St-Zip: WINTER GARDENS, FL 34878

Title: VP ( ) Delete  
Name: STEPHENS, TONI  
Address: 678 W. BAY ST.  
City-St-Zip: WINTER GARDENS, FL 34787

Title: ST ( ) Delete  
Name: GREENE, M.S.  
Address: 1613 FRANCES AVE  
City-St-Zip: FT. PIERCE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change ( ) Addition  
Name: GREENE, CLAUDE  
Address: 505 N. BOYD ST  
City-St-Zip: WINTER GARDENS, FL 34878

Title: VP (X) Change ( ) Addition  
Name: STEPHENS, TONI  
Address: 505 N. BOYD ST  
City-St-Zip: WINTER GARDENS, FL 34787

Title: ST (X) Change ( ) Addition  
Name: GREENE, M.S.  
Address: 1613 FRANCES AVE  
City-St-Zip: FT. PIERCE, FL 34949

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: TONI G. STEPHENS

VP

04/20/2005

Electronic Signature of Signing Officer or Director

Date