

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P97000105871

Entity Name: ALWAYS GREEN, INC.

**FILED**  
**Aug 18, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

381 ROBERTS RD  
OLDSMAR, FL 34677 US

**New Principal Place of Business:**

420 ROBERTS RD  
OLDSMAR, FL 34677 US

**Current Mailing Address:**

P O BOX 297  
OLDSMAR, FL 34677 US

**New Mailing Address:**

FEI Number: 59-3483194      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

EELLS, PETER  
536 BAYWOOD DR. NORTH  
DUNEDIN, FL 34698 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: EELLS, PETER C  
Address: 536 BAYWOOD DR. NORTH  
City-St-Zip: DUNEDIN, FL 34698

Title: VPST ( ) Delete  
Name: EELLS, DOROTHY M  
Address: 536 BAYWOOD DR. NORTH  
City-St-Zip: DUNEDIN, FL 34698

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: DOROTHY M. EELLS

VP

08/18/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date