## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P97000107982**

1. Entity Name
GREENWICH CAPITAL CORPORATION



FILED Jun 24, 2008 08:00 AM Secretary of State

Principal Place of Business

801 SW SAN ANTONIO DR PALM CITY, FL 34990 Mailing Address

801 SW SAN ANTONIO DR PALM CITY, FL 34990



06202008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0803004

Applied For Not Applicab

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BIGGS, ARTHUR E 801 SW SAN ANTONIO DR PALM CITY, FL 34990

## DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the part the obligations of registered agent.  SIGNATURE	purpose of changing its registered office or re		oth, in the State of Florida. I am famillar with, and accept 000000953353 /24/08-80001-013 150.00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating		required when reinstating)	DATE
FiLE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## OFFICERS AND DIRECTORS 10. TITLE DC **BIGGS, ARTHUR E** NAME STREET ADDRESS 801 SW SAN ANTONIO DR CITY-ST-ZIP PALM CITY, FL 34990 TITLE BIGGS, ARTHUR E III 4401 SW BIMINI CIRLCE N STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 TITLE **BIGGS. CHARLOTTE E** NAME STREET ADDRESS **801 SW SAN ANTONIO DR** CITY-ST-ZIP PALM CITY, FL 34990 TITLE DVP BIGGS, WILLIAM E NAME STREET ADDRESS 4456 SW BIMINI CIRCLE S CITY-ST-ZIP PALM CITY, FL 34990 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 I changed, or on an attachment with an address, with all other like empowered.

CICMATUDE.

hat & Buck

6/4/08