

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000013160

1. Entity Name

GREEN'S FREEDOM FITNESS, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90013 013 ***150.00

Principal Place of Business

Mailing Address

5337 CEDAR LAKE ROAD
BLDG. 11 UNIT 11
BOYNTON BEACH FL 33437

5337 CEDAR LAKE ROAD
BLDG. 11 UNIT 11
BOYNTON BEACH FL 33437-3056

2. Principal Place of Business

3. Mailing Address

9819-G S. Military Tr. 9819-G S. Military Tr.

9819-G S. Military Tr. 9819-G S. Military Tr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Boynton Bch, FL Boynton Bch, FL

4. FEI Number

650891039

Applied For

Not Applicable

Zip 33436

Country USA

Zip 33436

Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GREEN, DREW
5337 CEDAR LAKE ROAD
BLDG. 11 UNIT 11
BOYNTON BEACH FL 33437

Name Drew Green

Street Address (P.O. Box Number is Not Acceptable)

5337 Cedar Lake Rd

BLDG 10 Unit 16

City Boynton Bch

FL

Zip Code 33437

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.

SIGNATURE

Drew Green PRESIDENT + DREW GREEN 4-17-00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD
NAME GREEN, DREW
STREET ADDRESS 5337 CEDAR LAKE ROAD
CITY-ST-ZIP BOYNTON BEACH FL 33437 ☐ Delete

TITLE VICE PRESIDENT
NAME Sean Barnes
STREET ADDRESS 2470 Country Club Dr.
CITY-ST-ZIP APOEKA, FL 33712 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Drew Green* DREW GREEN PRES 4-17-00 561 369 1600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)