

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721685

Entity Name: MORGANWOODS GREENTREE, INC.

Current Principal Place of Business:

17824 N. US HWY 41
LUTZ, FL 33549

FILED
Apr 03, 2015
Secretary of State
CC9046847829

Current Mailing Address:

C/O WISE PROPERTY MANAGEMENT, INC
17824 N. US HWY 41
LUTZ, FL 33549 US

FEI Number: 23-7205926

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 N. HIGHLAND AVE
TAMPA, FL 33602 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name KODOVA, TANIA A
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

Title PD
Name GRAVLIN, JOHN C
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

Title SECRETARY
Name HUMES, MADGE
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name MEHARRY, CHARLES
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

Title VP
Name ROBBINS, CHRISTINE
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name ACKER, MICHELE L
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

Title TREASURER
Name DIAZ, GLORIA
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name HAND, ROSEMARY
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN C GRAVLIN

PRESIDENT

04/03/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KRAEMER, TOM
Address 17824 N. US HWY 41
City-State-Zip: LUTZ FL 33549