Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90008 045 \*\*\*150.00

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## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **F29067**

1. Corporation Name

GREEN ROCK REALTY, INC.

	,	_						
Principal Place of Business Mailing Address								
2513 N GULF BLVD		2513 N GULF BLVD						
INDIAN ROCKS BEACH FL 33785		INDIAN ROCKS BEACH FL 33785-0248				DO NOT WRITE II	N THIS SDACE	
US		US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
						04/09/1981		
2. Principal Pl	ace of Business	2a. Mailing Ad	dress			4. FEI Number		Applied For
21	•	26				59-2082714		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certifcate of Status Desired		5 Additional
22		27				0.	Fea.	Required
City & State	<del>9</del>	City & Stat	e			6. Election Campaign Financing		00 May Be
23		28		<del></del>		Trust Fund Contribution		ed to Fees
Zip	Country	Zip	_	Country		8. This corporation owes the current y		□No
24	25	29	30	<u> </u>		Personal Property Tax.	Yes	
	9. Name and Address of Current	Registered Agen	<u>t                                      </u>	81	Name	10. Name and Address of New Regis	stered Agent	
GREENBERG, BERNARD Z					Name	·		
2513 N GULF BLVD			82	Street Ad	dress (P.O. Box Number is Not Acceptable)	ı		
INDIAN ROCKS BEACH FL FL 33785								
INDIA	AN ROCKS BEACH FE FE 33703			83				1
				84	City		- 85 Z	ip Code
_					-		FL  °°	itai
office or ti	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	it Florida. Such cha	ange was autho	orizea dv	tne corpora	poration submits this statement for the purplion's board of directors. I hereby accept the	appointment as	registered
SIGNATURE	_							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Reg	gistered Age	nt signature requi		DATE	
12.	OFFICERS AND			13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	PTSD	Ц	DELETE	1.1 TITLE			☐ Chan	ge [] Addition
NAME	GREENBERG, ANITA			1.2 NAME				
STREET ADDRESS	2513 N GULF BLVD POB 248			1.3 STREE	TADDRESS			
CITY-ST-ZIP	INDIAN RCKS BCH FL			1.4 CITY-S	T-ZIP			[77] A dated
TITLE	D		DELETE	2.1 TITLE			☐ Chan	ge 🗀 Addition
NAME	GREENBERG, BERNARD Z			2.2 NAME				ľ
STREET ADDRESS	2513 N GULF BLVD POB 248			2.3 STREE	T ADDRESS			}
CITY-ST-ZIP	INDIAN RCKS BCH FL			2. 4 CITY-5	ST-ZIP		<u></u> -	
TITLE			DELETE"	3.1 TITLE	1		Chan	ge 🗌 Addition \
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREE	TADDRESS			1
CITY+\$T+ZIP	_			3.4. CITY-5	ST-ZIP			
TITLE			DELETE	4.1 TITLE	1		☐ Chan	ge 🗌 Addition
NAME				4.2 NAME				ļ
STREET ADDRESS				4.3 STREE	TADORESS			
CITY-ST-ZIP				4.4 CITY-S	T-ZIP	<u> </u>		
TITLE			DELETE	5.1 YITLE			☐ Chan	ge
NAME				5.2 NAME				
STREET ADDRESS		•		5.3 STREE	TADDRESS			Ì

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

64 CITY-ST-ZIP

6.1 T∏LE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

☐ Change

☐ Addition