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Mar 26 1997 8:00am
Secretary of State



PROFIT
CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000008871 (5)

1. Corporation Name

THE GREENSKEEPER, INC.

Principal Place of Business

P.O. BOX 1241
GOLDENROD FL 32733

Mailing Address

P.O. BOX 1241
GOLDENROD FL 32733-1241



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

11/30/1992

3a. Date of Last Report

04/25/1996

4. FEI Number

59-3151538

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

TAYLOR, JAMES T
5473 BAYTOWNE PLACE
OVIEDO FL 32765

10. Name and Address of New Registered Agent

81 Name James T Taylor
82 Street Address (P.O. Box Number is Not Acceptable)
2433 Pear Tree Court
83
84 City Orlando FL 85 Zip Code 32807

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person named as registered agent, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/15/97

12. OFFICERS AND DIRECTORS

TITLE	DPST	☐ DELETE
NAME	TAYLOR, JAMES T	
STREET ADDRESS	5473 BAYTOWNE PLACE	
CITY-STATE-ZIP	OVIEDO FL 32765	
TITLE	D	☒ DELETE
NAME	TAYLOR, KIMBERLY R	
STREET ADDRESS	5473 BAYTOWNE PLACE	
CITY-STATE-ZIP	OVIEDO FL 32765	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	2433 Pear Tree Court
1.4 CITY-STATE-ZIP	Orlando, FL 32807
2.1 TITLE	☐ Change ☐
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James T. Taylor

2/15/97

Date

407-

Copy