FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

ACCEPTED
SUBMITTED
BY
TALLAHASSEE, FLORIDA

DOCUMENT # P94000061874 (1)

1. Corporate Name

GREEN OAK OF COLLIER COUNTY, INC.

Principal Place of Business	Mailing Address
3240 COLLEE CT NAPLES FL 33962	3240 COLLEE CT NAPLES FL 33962

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/23/1994**
3a. Date of Last Report:

21	2. Principal Place of Business: 545 E. GOODLAND DR	26	2a. Mailing Address: P.O. BOX 546
22	State, Apt. #, etc.	27	State, Apt. #, etc.
23	City & State: GOODLAND, FL 33933	28	City & State: GOODLAND, FL
24	Zip: 33933	25	County: COLLIER
29	Zip: 33933	30	County: COLLIER

4. FEI Number: 65-0513323 ☐ 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. Does corporation owe any taxes under s. 199.032, Florida Statutes? ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WEISS, FRANK 2700 E BAY DR #107 LARGO FL 34641	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 Florida Statutes the above named officer(s) 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, F.S. 607.0505 Florida Statutes.

SIGNATURE: [signature] 4/1/95
SIGNATURE OF NEW REGISTERED AGENT, IF ANY — DATE

12. OFFICER AND/OR DIRECTOR	13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS
P.D JEROME NOSS 716 SHORE DRIVE OLDSMAR, FL. 34677	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report, voluntarily furnished and 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 with an asterisk (*), or on an attachment with an asterisk.

SIGNATURE: [signature] 4/1/95
SIGNATURE OF NEW OFFICER OR DIRECTOR, IF ANY — DATE

FOR PRINTED NAME OF BUSINESS OFFICER ON BOTTOM — Daytime Phone #

0330684 CP