

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90043 006 ****61.25

DOCUMENT # 742854			
1. Entity Name THE GREENS OF EMERALD HILLS, INC.			
Principal Place of Business % LLOYD PROCTON, ATTORNEY AT LAW 400 S.E. 18TH STREET FORT LAUDERDALE, FL 33316		Mailing Address % LLOYD PROCTON, ATTORNEY AT LAW 400 S.E. 18TH STREET FORT LAUDERDALE, FL 33316	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-1850184		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PROCTON, LLOYD W., ESQ. 400 S.E. 18 STREET FT. LAUDERDALE, FL 33316		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D RUBENSTEIN, WILLIAM <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBENSTEIN, WILLIAM	NAME	
STREET ADDRESS	129 LAUREL ROAD	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	CITY-ST-ZIP	
TITLE	D MILLER, ERIC <input checked="" type="checkbox"/> Delete	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, ERIC	NAME	BUCHALTER, MARK
STREET ADDRESS	30 CEDAR RD.	STREET ADDRESS	116 Kensington Rd
CITY-ST-ZIP	HOLLYWOOD, FL 33021	CITY-ST-ZIP	Hollywood FL. 33021
TITLE	SD SUSS, CAROL <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUSS, CAROL	NAME	
STREET ADDRESS	130 LAUREL ROAD	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	CITY-ST-ZIP	
TITLE	D GREENE, JEFFREY <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENE, JEFFREY	NAME	
STREET ADDRESS	128 LAUREL ROAD	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	CITY-ST-ZIP	
TITLE	VD STRAUSS, LAWERENCE <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRAUSS, LAWERENCE	NAME	
STREET ADDRESS	138 GREENS RD.	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	CITY-ST-ZIP	
TITLE	TD GREEN, JEFF <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN, JEFF	NAME	
STREET ADDRESS	128 LAUREL RD.	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	CITY-ST-ZIP	
12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____		Date: 1/27/04 Daytime Phone #: (954) 738-0310	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

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