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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 501555 (7)

Principal Place of Business	Mailing Address
101 BIG BEND RD	101 BIG BEND RD
RUSKIN FL 33572-1407	RUSKIN FL 33572-1407

FILED Feb 27 1998 8:00am Secretary of State

ELSBE	RRY GREENHOUSE, INC.					
Principal Plac	e of Business	Mailing Address				(\$80) (18 11 810 11 81 0 11 81011 1001
101 BIG BEND RD 101 BIG BEND RD RUSKIN FL 33572-1407					DO NOT WRITE IN TH	HIS SPACE
					3. Date Incorporated or Qualified	
					04/16/1976	
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	·		59-1661246	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	_		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	y	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	, Name and Address of Currer	it Hegistered Agent	81	Name	10. Name and Address of New Register	ad Agent
	SBERRY, ROSS S.		"	Name	`	
	Y #41 & STATE RD. 672		82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
RU:	skin fl. 33570		63			
			63			
			84	City		85 Zip Code
	0.7755			<u></u>		L B3 Zip Code
11, Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statut of Florida Such change was a	es, the abov authorized b	e-named corporati	oration submits this statement for the purpos on's board of directors. I hereby accept the	appointment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statute	S.		
SIGNATURE						
40	Signature, typed or printed name of registered ago OFFICERS AN		E. Registered Ag	ent signature require		
12.	STD	DELETE	1.1 TITLE	1	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	ELSBERRY, ROSS S		1,2 NAME	- 1		C Onlargo C Accessor
STREET ADDRESS	HWY #41 & STATE RD 672			T ADDRESS		
CITY-ST-ZIP	RUSKIN, FL 00000		1.4 CiTY-5	·		
TITLE	STD	DELETE	2.1 TITLE	DI-TIL		Change Addition
NAME	ELSBERRY, DONALD L		2.2 NAME		·	
STREET ADDRESS	HWY #41 & STATE RD 672		2.3 STREET	r annerss	•	ł
CITY-ST-ZIP	RUSKIN, FL 00000		2.4 CITY -			ļ
TITLE	VD	☐ DELETE	3.1 TITLE	OI LH		Change Addition
NAME	ELSBERRY, TERRY L		32 NAME			
STREET ADDRESS	HWY #41 & STATE RD 672		1	r address		İ
CITY-ST-ZIP	RUSKIN, FL 00000		3.4. CITY-			1
TITLE	VD	DELETE	4.1 TITLE			Change Addition
NAME	ELSBERRY, BRUCE P		4. 2 NAME			•
STREET ADDRESS	HWY #41 & STATE RD 672		4.3 STREET			
CITY-ST-ZIP	RUSKIN, FL 00000		4.4 CITY - 5			
TITLE	VD	DELETE	5.1 TITLE			Change Addition
NAME	BENUS, LYNN		5.2 NAME			
STREET ADDRESS	HWY #41 & STATE RD 672		5.3 STREET	ADDRESS		
CITY-ST-ZIP	RUSKIN, FL 00000		5.4 CITY- 9	ST-ZIP		
TITLE	PD	☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME	THOMAS, JEFF		6.2 NAME			
STREET ADDRESS	HWY #41 & STATE RD 672		6.3 STREET	ADDRESS		
CITY-ST-ZIP	RUSKIN FL		6.4 CITY-S	ST-ZIP		

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 within address.

Solante