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 # 819405

1. Corporation Name

THE CURT GREEN COMPANY

Principal Place of Business Mailing Address
950 YULEE ST. 950 YULEE ST.
TALLAHASSEE FL 32304 TALLAHASSEE FL 32304

FILED Feb 10, 1999 8:00am Secretary of State

02-10-1999 90007 038 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

03/03/1966

2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			
1	26				59-1113423		No	t Applicable	
Suite, Apt. #	, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	<u>.</u> .	\$8.75 A Fee Re		
Z				- "	6. Election Campaign Financing	1 1	\$5.00	May Re	
City & State City & State					Trust Fund Contribution		Added t		
Zip	- Country	Zip	Country	/	8. This corporation owes the curre	ent year Inta		_	
4	25 29 30				Personal Property Tax.		Yes	□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New F	egistered /	Agent		
			81	Name					
GREEN, TRUMAN C JR 2709 MCELROY STREET				82 Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32304				83					
							11		
			84	City		FL	85 Zip (Jode	
office or re agent. I ar	to the provisions of Sections 607.0502 ogistered agent, or both, in the State on m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	nonzeo by la Statute	s.	nis board of directors. Thereby acces	purpose of t the appoin	changing its ntment as re	registered gistered	
Cignature, types of participants			13.	ent signature required	ature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECT		D DIRECTO	RS IN 12	
12.		DELETE DELETE	1,1 TITLE		ABBITIONS/SIDINGES TO G.	102110741	Change	Addition	
TITLE	PD								
NAME	GREEN, TRUMAN CURTIS, JR		1.2 NAME						
STREET ADDRESS	950 YULEE STREET		1	TADDRESS			•	}	
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-	ST-ZIP			Change	Addition	
TMLE	· \$	☐ DELETE	2.1 TITLE				Civalide		
NAME	GREEN, EVELYN J.		2.2 NAME						
STREET ADDRESS	950 YULEE STREET		2.3 STRE	ET ADDRESS				}	
CITY-ST-ZIP	TALLAHASSEE FL		2.4 CITY-	ST-ZIP			- · ·		
TITLE	V	☐ DELETE	3.1 TITLE				☐ Change	Addition	
NAME	GREEN, JOHN RUSSELL		3.2 NAME						
STREET ADDRESS	950 YULEE STREET		3.3 STRE	ET ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL		3.4. CITY-	ST-ZIP	<u>: : : : : : : : : : : : : : : : : : : </u>				
TIŢLE		☐ DELETE	4.1 TITLE		*	· · · .	☐ Change	Addition	
NAME			4. 2 NAME	:		•			
STREET ADDRESS			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP			4.4 CITY-	ST-ZIP					
TITLE		☐ DELETÉ	5.1 TITLE				Change	Addition	
NAME			5.2 NAME						
STREET ADDRESS	:		5.3 STRE	ET ADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	<u> </u>			·	
TITLE		☐ DELETE	6.1 TITLE		1		☐ Change	☐ Addition	
NAME			6.2 NAME			•			
STREET ADDRESS			6.3 STRE	ET ADDRESS					
			6.4 CITY-	ST-ZIP					
CITY-ST-ZIP	pertify that the information supplied wit	h this files does not qualify for			Section 119 07(3)(i). Florida Statutes.	I further ce	tify that the	information	

4. 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 informatio 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.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(830) 57:01/19/99

(850) 576-8862

O / D / O - C

CR2E034 (11/98)