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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

F9300002090 (9)

WILLIAM C. GREENE, INC.

FILED Mar 14, 1996 08:00 AM **Secretary of State**



rincipal Plac∈	of Business	Mailing Address						
2930 OKEECHOBEE BLVD. WEST PALM BCH. FL 33409 US 2930 OKEECHOBEE BLVD. WEST PALM BCH. FL 33409 US								
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05		00			3. Date Incorporated or Qualified		1	
Principal P	lace of Business	2a. Mailing Address			4. FEI Number		1	lied For
]		26			05-0452472	ė	8.75 Ad	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Fee Req	
City & Stat	e	City & State			6. Election Campaign Financing		\$5.00 N	•
]		28			Trust Fund Contribution		Added to	
. 2ф	Country	Zip	Coun	iry	8. This corporation has liability for in Florida Statutes	intangible tax un 	novers 195	3.032,
	25 9. Name and Address of Curr	29 Anni Benislared Aneni	[3 0]		10. Name and Address of New R		nt	
	g. Name and Address of Com-	Ent negistered Agent		Name				
COLID	MELL, PAUL ESQ		<u> </u>	2 Street Add	ress (P.O. Box Number is Not Acceptab	ole)		
	TER YOAKLEY & STEWART, P.A	١.	[Sileer Aud	less (F.O. Do. Marie			
	FLAGLER DR.	-	•	33				
	PALM BEACH FL 33401		},	34 City		F . 8	IS Zip C	ode
					eration submits this statement for the pure	<u>FL</u>		
CONTRACTOR IN				gent signature regun	ration scionnis in is statement for the policy accept the applications of directors. I hereby accept the applications and when relies taking	DATE		
CONTRACTOR IN	Signature: typed or printed name of registered ag	yest as o the Tappinaths	(NCITE: Registered A		ed when reinstating)	DATE		 IN 12
SGNATURE	Styndiste typed or printed name of registered ago OFFICERS A	gent and the Tapplicates	(NOTE: Registered #	gent agrature recom		DATE FICERS AND DIF	RECTORS	
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 eath; 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 change? Or on an attachment with an address.

SIGNATURE:

3-6-96 (407)640-0006