

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

FILED
Aug 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000000975 (9)

1. Corporation Name
ALL GREEN CORPORATION

Principal Place of Business
1335 G CANTON ROAD
MARIETTA GA 30060

Mailing Address
1335 G CANTON ROAD
MARIETTA GA 30060



DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/24/1997	
21. Suite, Apt. #, etc	22. City & State	26. Suite, Apt. #, etc	27. City & State	4. FEI Number 59-2746524	Applied For Not Applicable
23. Zip	24. Country	28. Zip	29. Country	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. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent GUY, PATRICK 28870 U.S. 19 NORTH CLEARWATER FL 34619		10. Name and Address of New Registered Agent BRAD STOWELL 13700 SUTTON PARK DR, #1011 JACKSONVILLE FL 32224	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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, Section 607.0505, Florida Statutes.

SIGNATURE: BRAD STOWELL
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
21-JULY-1998
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD BARANT, EDWARD J 1335 G CANTON ROAD MARIETTA GA	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	V MCKEE, MICHAEL 4165 ISLANDVIEW DR FENTON MI	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	S SCHULTZ, LAURENCE S 2600 W BIG BEAVER STE 550 TROY MI	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	500002620685
CITY-ST-ZIP		3.4 CITY-ST-ZIP	-08/20/98--01026--017
TITLE	T OLSON, MARK V 1335 G CANTON RD MARIETTA GA	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	500002620685
CITY-ST-ZIP		4.4 CITY-ST-ZIP	-08/20/98--01026--00018
TITLE		5.1 TITLE	CONTROLLER
NAME		5.2 NAME	RICHARD HESSLER
STREET ADDRESS		5.3 STREET ADDRESS	1335 CANTON RD, SUITE 6
CITY-ST-ZIP		5.4 CITY-ST-ZIP	MARIETTA, GA 30060-6053
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	500002620685
CITY-ST-ZIP		6.4 CITY-ST-ZIP	-08/20/98--01026--019

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 with an address.

SIGNATURE: [Signature] 21-JULY-1998 (730)973-1600

CR2E034 (10/97)