## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G65016

(9)

GREENSCAPE OF DESTIN, INC.

**FILED** Sep 15 1997 8:00am Secretary of State



Principal Place of Business  40 LINCOLN DRIVE FT. WALTON BEACH FL 32547 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 10/10/1983 08/13/1996  2. Principal Place of Business 26 27  Suite, Apt. #, etc. 27  City & State 28  City & State 29  Country  Applied For Status Desired  Country  Country  Applied For Status Desired  Fee Required  Fee Required  Fee Required  Added to Fees:  Country  8. This corporation owes or has paid the current year lotangible.														
FT. WALTON BEACH FL 32547 US    Common	Principal Place of Business Mailing Address									T NOBINE AND ALLAS DIVE DAILE DA LOS STATES DA	II DIDII DIDIA	4 ( <b>5</b> (8 <b>4 5</b> (1 <b>5</b> )	IDII CIBII ILDI	
2. Principal Place of Business   2a. Mailling Address   4. [Fit Nambor   59-2330991   Applied for   164 Applied for   16	40 LINCOLN DRIVE 40 LINCOLN DRIVE FT. WALTON BEACH FL 32547 FT. WALTON BEACH FL 32547						47	DO NOT WRITE IN THIS SPAC						
2. Principal Place of Business   2. Maintay Address   5. Sec 330091   Applied For   Not Again deather   Sec 35   Sec 330091   Not Again deather   Sec 35   Sec 330091   Not Again deather   Sec 35   Sec 330091   Sec 36   Not Again deather   Sec 36   Sec 30091   Sec 36   Se	·									· ·	<b>)</b>			
Solic, Apt. 4, etc.    Solic, Apt. 4, etc.	2. Principal P	lace of Busines	2a	2a. Mailing Address					1					
Solic, Apt. 4, etc.    Solic, Apt. 4, etc.	21			26	26					59-2330991		!	Not Applicable	
City & State   Country   28   Country   29   Country   8. This corporation owes or has part the current year Integritive   Personel Propriet & General Address of Current Registered Agent   10. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address	Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.					5. Certificate of Status Desired					
Zip   Country   Zip   Country   Sints corporation ones of has paid the current year Intemptible	City & State	е		28	<del>                                     </del>									
10. Name and Address of New Registered Agent   10. Name and Address of New Registered New Regist	Zip	Zip Country			Zip Country			,		8. This corporation owes or has paid the current year Intangible				
EDDY DANN B MISTY WAY	24													
## STREET ADDRESS (P.O. Box Number is Not Acceptable)  ## STREET A			nd Address of	10. Name and Address of New Re	gistered	Agent								
#3770 DESTIN FL 32541  11. Pursuant to the provisions of Sciences 607 0707 and 607 1206. f kelida Statistics, the ebove-rearned corporation submits this statement for the purpose of changing its regis eried agent. I am familiar with, and accept the obligations of Section 607 0506, Florida Statutes.    11. Pursuant to the provisions of Section 607 0506 (Section 607 0506, Florida Statutes)   12.							81	Name					ļ	
11. Pursuant to the provisions of Sections 607 6502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of, Section 607 6505, Florida Statutes, agent 1 am familiar with, and accept the obligations of Section 607 6505, Florida Statutes, and accept the obligations of Section 607 6505, Florida Statutes, and accept the obligations of Section 607 6505, Florida Statutes, and accept the obligations of Section 607 6505, Florida Statutes, and accept the obligations of Section 607 6505, Florida Statutes, and accept the obligations of Section 607 6505, Florida Statutes, and accept the obligations of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Florida Statutes, and accept the obligation of Section 607 6505, Flo							82 Street Address (P.O. Box Number is Not Ad				ole)			
The Pursuant to the provisions of Sections 607,0502 and 607 1508, Fierida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the Strate of Fierida. Such change was eatherized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Strate of Fierida. Such change was eatherized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Forida Statutes.  SIGNATURE    Destination of the purpose of changing its registered agent agent, and the properties of the purpose of changing its registered agent, and the properties of the properties	DES	STIN FL 3254	1				83							
11. Pursuant to the provisions of Socions 607,0500 and 607 1508. Florida Statutos, the ebove-hanned corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607,0506, Fiorida Statutos.  SIGNATURE  12. OF FICERS AND DIRE CTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRE CTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  17. OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  19. OFFICERS AND DIRECTORS IN 12.  10. In the company of period many of impactable in a repatable in the repatable in the production of the period many of the period of directors. I hereby accept the appointment as registered dependent of the period many of the period many of the period many of the period of directors. I hereby accept the appointment as registered dependent of the period of directors. I hereby accept the appointment as registered periods and the period of directors. I hereby accept the appointment as registered periods and the period of directors. I hereby accept the appointment as registered periods and the period of directors. I hereby accept the obligations board of directors. I hereby accept the obligations. I hereby accept the obligations. I hereby accept the obligations. I hereby							84	City			FL	85 Zij	p Code	
SIGNATURE   Signature, typed or period rime of Ingustreed agent and flow if inguistance (ingustreed agent and flow if inguistance)   13.	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													
12.	)	· ·				·								
TITLE	Signature, typed or printed name of registered agent and little if applicable (NOTE							ant signature	бөлирөт			DIRECTA	200 181 40	
NAME   STREET ADDRESS   3770 MISTY WAY   1.3 SIREET ADDRESS   1.4 CITY-ST-2IP   1.4 CITY-ST-2IP   1.4 CITY-ST-2IP   1.5 CITY-ST-2IP   1.		VPD	Office	H2 MAD DIRE		TELETE			ſ	ADDITIONS/CHANGES TO OFFIC	JERS ANL			
STREET ADDRESS   CITY-ST-ZIP   DESTIN FL	ì		BRUCE		٠ د	,,,,,,,	ì		1			C. Ontango	7	
CITY_ST-ZIP								Ahnpece					]	
TITLE		DECTIN EL											1	
STREET ADDRESS   3770 MISTY WAY   23 STREET ADDRESS   2.4 DITY: ST-ZIP						DELETE			<del> </del>			Change	Addition	
STREET ADDRESS   3770 MISTY WAY   23 STREET ADDRESS   2.4 DITY: ST-ZIP	NAME	EDDY, DAN	IN				22 NAME		1					
TITLE D DALECCIO, JENNY 32 NAME STREET ADDRESS 14 RANGER ST 33 STREET ADDRESS CITY-ST-ZIP FT WALTON BCH FL 34.CITY-ST-ZIP TITLE D DELETE 4.1 TITLE Change Addition NAME BROUGH, HERBERT 4 2 NAME STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 4.1 TITLE Change Addition NAME KELLEY-RAINEY, GLENDA 5.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 5.1 TITLE CHANGE ADDRESS CITY-ST-ZIP TITLE D DELETE 5.1 TITLE CHANGE ADDRESS CITY-ST-ZIP TITLE CHANGE STREET ADDRESS CITY-ST-ZIP TITLE CHANGE CHANGE ADDRESS CITY-ST-ZIP TITLE CHANGE CHANGE ADDRESS CITY-ST-ZIP TITLE CHANGE CADDRESS	STREET ADDRESS			'			2.3 STREET ADDRESS		<b>}</b>				1	
TITLE DALECCIO, JENNY  NAME DALECCIO, JENNY  STREET ADDRESS  14 RANGER ST  FT WALTON BCH FL  34 CITY-ST-ZIP  TITLE  DELETE  4 2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DESTIN FL  14 CITY-ST-ZIP  TITLE  DELETE  44 CITY-ST-ZIP  TITLE  DAME  KELLEY-RAINEY, GLENDA  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  51 TITLE  Addition  KELLEY-RAINEY, GLENDA  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  61 TITLE  DELETE  61 TITLE  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition	CITY-ST-ZIP	DESTIN FL					2. 4 C(TY-	SI - 7IP						
STREET ADDRESS		D			1	ELFTE						Change	Acidition	
CITY-ST-ZIP	NAME						3.2 NAME							
TITLE D DELETE 4.1 LITTLE DELETE 4.1 LITTLE DELETE 4.1 LITTLE DELETE 4.2 NAME  STREET ADDRESS CITY-ST-ZIP DESTIN FL 4.4 CITY-ST-ZIP  TITLE D DELETE 5.1 TITLE D Change Addition  KELLEY-RAINEY, GLENDA 5.2 NAME  STREET ADDRESS 622 MOONEY RD. 5.3 STREET ADDRESS CITY-ST-ZIP  TITLE DELETE 6.1 TITLE DELETE 6.2 NAME  STREET ADDRESS 6.2 NAME ADDRESS 6.3 STREET A	STREET ADDRESS				3.3 \$			ADDRESS						
NAME BROUGH, HERBERT 4 2 NAME  STREET ADDRESS CITY-ST-ZIP DESTIN FL 4.4 CITY-ST-ZIP  TITLE D DELETE 5.1 TITLE 5.2 NAME  STREET ADDRESS 822 MOONEY RD. 5.3 STREET ADDRESS CITY-ST-ZIP FT WALTON BEACH FL 5.1 TITLE 5.4 CITY-ST-ZIP  TITLE DELETE 6.1 TITLE 5.3 STREET ADDRESS CITY-ST-ZIP FT WALTON BEACH FL 5.4 CITY-ST-ZIP  TITLE DELETE 6.1 TITLE 5.4 CITY-ST-ZIP  STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS	CITY-ST-ZIP	Y-ST-ZIP FT WALTON BCH FL			3.4. CIT			SI-ZIP	<u></u>					
STREET ADDRESS 745 INDIÁN TRAIL DESTIN FL 4.4 CITY-ST-ZIP TITLE NAME KELLEY-RAINEY, GLENDA STREET ADDRESS CITY-ST-ZIP FT WALTON BEACH FL DELETE DELETE 61 TITLE NAME STREET ADDRESS	TITLE					DELETE	4.1 11TLE					Change	Acdition	
CITY-ST-ZIP         DESTIN FL         4.4 CITY-ST-ZIP           TITLE         D         DELETE         5.1 TITLE         Change         Addition           NAME         KELLEY-RAINEY, GLENDA         5.2 NAME         STREET ADDRESS         STREET ADDRESS         CITY-ST-ZIP         CITY-ST-ZIP         CITY-ST-ZIP         TITLE         DELETE         61 TITLE         Change         Addition           NAME         CSTREET ADDRESS         6.3 STREET ADDRESS         6.3 STREET ADDRESS         CHANGE         Change         Addition	NAME	,				i	4 2 NAME		1				İ	
TITLE         D         DELETE         5.1 TiTLE         Change         Addition           NAME         KELLEY-RAINEY, GLENDA         5.2 NAME         5.2 NAME         5.2 NAME         5.3 STREET ADDRESS         CITY-ST-ZIP         FT WALTON BEACH FL         5.4 CITY-ST-ZIP         5.4 CITY-ST-ZIP         Change         Addition           NAME         NAME         6.2 NAME         6.3 STREET ADDRESS         6.3 STREET ADDRESS         6.3 STREET ADDRESS	STREET ADDRESS					4.3 \$1							[	
NAME STREET ADDRESS CITY-ST-ZIP FT WALTON BEACH FL  DELETE 61 TIFLE NAME STREET ADDRESS STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  Change Addition 6.2 NAME 6.3 STREET ADDRESS	CITY-ST-ZIP						4.4 CITY - S	T - ZIP						
STREET ADDRESS   822 MOONEY RD.   5.3 STREET ADDRESS   FT WALTON BEACH FL   5.4 CHY-S1-ZIP     TITLE   Change   Addition   Addition   AMME   STREET ADDRESS   6.3 STREET ADDRESS   6.3 STREET ADDRESS   Change   Addition	TITLE	_				ET41E	5.1 TITLE					Change	Addition	
CITY-S1-ZIP FT WALTON BEACH FL 5.4 CITY-S1-ZIP  TITLE	NAME			)A			5.2 NAME						l	
TITLE         DELETE         61 TITLE         Change         Addition           NAME         62 NAME           STREET ADDRESS         63 STREET ADDRESS	STREET ADDRESS						5.3 STREET	ADDRESS	ĺ					
NAME  \$1 6.2 NAME  \$3 STREET ADDRESS		FI WALTO	N REACH FL		· · · · · · · · · · · · · · · · · · ·	ri ri		T · ZIP	ļ			17 2		
STREET ADDRESS 6.3 STREET ADDRESS						HLETE:						L Change	: LJ Addition	
	NAME						6.2 NAME	Ì	]				Ì	
CITY-ST-ZIP	STREET ADDRESS					:	6.3 STREET	ADDRESS						
14. Ide bereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the		and the state of t	a interestin		nia filia - de -				lala di	C	- 1 6	11.12.0	- 45	

I the large state of the corporation of the corpora

9/4/92 (200)8/4/5/11