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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 02 1997 8:00am Secretary of State

	MENT # G7221 ON GREENHOUSES, INC.	Mailing Address						
710 OLD MT DORA RD Eustis Fl. 32726		710 OLD MT DORA RD Eustis Fl 32726-7925						
					3. Date Incorporated or Qualified	3a. Date o	of Last R	leport
					11/21/1983	04/03/	/1996	
	Place of Business	2a. Mailing Address			4. FEI Number		Ar	oplied For
Suite, Apt	# 640	Suite, Apt. #, etc.			59-2353075	à		ot Applicable
Suite, Agri	W, UIL.	27 Suite, Apr. #, etc.			5. Certificate of Status Desired			Additional equired
City & Sta	le	City & State			6. Election Campaign Financing			May Be
3		28			Trust Fund Contribution			to Fees
Zip	Country	Ζιρ	Cou	ntry	8. This corporation has liability fo	r intangible tax	under s	199.032,
<u> </u>	25	29	30			Yes N		
	9, Name and Address of Curre	int Registered Agent		81 Name	10. Name and Address of New R	egistered Age	nt	
	HNSON, DENNIS							
3501 BRITT ROAD				82 Street Address (P.O. Box Number is Not Acceptable)				
MI	. DORA FL 32757		Į	83		· · · · · · · · · · · · · · · · · · ·		
					······································			
			İ	64 City		FL 8	5 Zip	Code
 Pursuant office or agent. La SIGNATURE 	to the provisions of Sections 607.05 registered agent or both, in the Stat am familiar with, and accept the obligions.	02 and 607.1508, Florida Stat e of Florida. Such change was gations of, Section 607.0505, I	utes, the at s authorized Florida Stat	cove-named d by the corp utes.	corporation submits this statement for the poration's board of directors. I hereby accoration	purpose of chi ept the appoint	anging ii ment as	ts registered registered
	Signature, typical or paniled name of registered as			S Agent a gnature	required when reinstating)	DATE		20 11 40
12.	OFFICERS AT	ND DIRECTORS	13.		required when reinstating) ADDITIONS/CHANGES TO OFF	ICERS AND DI		
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14. I do hereby 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 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 Bock 13 if changed, or or an attachment with an address.

SIGNATURE

JOHN GUIRETDE NNISR. Johns

24/97 386

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