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

**PROFIT** CORPORATION ANNUAL REPORT

1998

25

GREEN, WALTER R. 205 W. MAIN STREET

**AVON PARK FL 33825** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

30

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DOCUMENT #

H55168

(9)

GREDIN, INC.

24

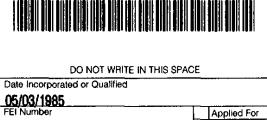
£.

Principal Place of Bus						
205 W. MAIN STREET AVON PARK FL 33825		205 W. MAIN ST AVON PARK FL		DO NOT WR		
				<ol> <li>Date Incorporated or Qualified</li> <li>05/03/1985</li> </ol>		
2. Principal Place of Business		2a. Mailing Addr	ess	4. FEI Number		
21		26		59-2634031		
Suite, Apt. #, etc.		Suite, Apt. #,	etc.	5. Certificate of Status Desired		
City & State		City & State		Election Campaign Financing     Trust Fund Contribution		
Zip	Country	Zip	Country	a. This corporation owes or has		

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9. Name and Address of Current Registered Agent

**FILED** Feb 26 1998 8:00am Secretary of State



8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

119/98

(941) 453-3056

10. Name and Address of New Registered Agent

Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

☐ Yes

Street Address (P.O. Box Number is Not Acceptable)

			B4 City		FL  85	Zip C	ode				
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											
		Registered Agent signature required when reinstating)		DATE							
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES T							
TITLE	D	☐ DELETE	1.1 TITLE			hange	Addition				
NAME	Green, Walter R		1.2 NAME								
STREET ADDRESS	1326 E. LAKE LOTELA DR.		1.3 STREET ADDRESS				-				
CITY-ST-ZIP	AVON PARK FL		1.4 CITY-ST-ZIP								
TITLE	D	☐ DELETE	2.1 TITLE		c	hange	☐ Addition				
NAME	GREEN, MARIE D.		2.2 NAME				ł				
STREET ADDRESS	1326 E. LAKE LOTELA DR.		2.3 STREET ADDRESS		2.1						
CITY-ST-ZIP	AVON PARK FL		2. 4 CITY-ST-ZIP		•						
TITLE	DP	DELETE	3.1 TITLE		□ c	hange	Addition				
NAME	BORDIN, KENNETH R.		3.2 NAME				i				
STREET ADDRESS	4619 STURGEON DR.		3.3 STREET ADDRESS				1				
CITY-ST-ZIP	SEBRING FL		3.4. CITY-ST-ZIP				1				
TITLE	SVP	DELETE	4.1 TITLE		□ c	hange	☐ Addition				
NAME	BORDIN, DONNA M.		4. 2 NAME								
STREET ADDRESS	4619 STURGEON DR.		4.3 STREET ADDRESS				Ì				
CITY-ST-ZIP	SEBRING FL		4.4 CITY-ST-ZIP								
TITLE		DELETE	5.1 TITLE		□ C	hange	Addition				
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET ADDRESS				J				
CITY-ST-ZIP			5.4 CITY-ST-ZIP								
TITLE		DELETE	6.1 TITLE		CI	hange	Addition				
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS								
CITY OF TID			SACITY OF 74D								

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.