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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	K47458
1. Corporation Name		1111100

Suite, Apt. #, etc.

City & State

22

23

24

GREEN ARBOR, INC.

Principal Place of Business	Mailing Address
4830 WEST KENNEDY BLVD. SUIT 740 TAMPA FL 33609	4830 WEST KENNEDY BLVD Suit 740 Tampa Fl 33609
	2a Mailing Address

9. Name and Address of Current Registered Agent

Country

25

26

27

28

29

Zip

Suite, Apt. #, etc.

City & State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

ĭZNo

Not Applicable

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

11/28/1988

59-2967878

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

4. FEI Number

ONE_URBAN_CENTRE, 4830 W. KENNEDY BLVD.  SUITE 740 TAMPA FL 33609  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, like above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of director's. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.6505, Florida Statutes, like above-named corporation submits this statement for the purpose of changing its registered agent, and accept the deligations of, Section 607.6505, Florida Statutes, like above-named corporation's board of director's. I hereby accept the appointment as registered agent, and accept the deligations of, Section 607.6505, Florida Statutes, like above-named corporation submits this statement for the purpose of changing its registered agent, agent, agent, agent agent, and accept the deligations of, Section 607.6505, Florida Statutes, like above-named corporation's board of director's. I hereby accept the appointment as registered agent, agent, agent agent, and accept the deligations of, Section 607.6505, Florida Statutes, like above-named corporation submits this statement for the purpose of changing its registered deligations of the corporation's board of director's. I hereby accept the appointment as registered deligations of the corporation's board of director's. I hereby accept the appointment as registered deligations of the corporation's board of director's. I hereby accept the appointment as registered deligations of the corporation's board of director's. I hereby accept the appointment as registered deligations of the corporation's board of director's. I hereby accept the appointment as registered deligations of the corporation's board of director's. I hereby accept the appointment as registered deligations of the corporation's board of director's. I hereby accept the appointment as registered deligations of the corporat				81	Name				ł		
TAMPA FL 33609  11. Pursuant to the provisions of Sections 607 0502 and 607 1608. 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 director's. I hereby accept the appointment as registered agent, and burnillar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature, flyade or prited name of registered agent and the # application of the septication of the purpose of changing its registered agent of director's. I hereby accept the appointment as registered agent of director's. I hereby accept the appointment as registered agent of director's. I hereby accept the appointment as registered agent of director's. I hereby accept the appointment as registered agent agent of director's. I hereby accept the appointment as registered agent agent of director's. I hereby accept the appointment as registered agent agent of director's. I hereby accept the appointment as registered agent agent of director's. I hereby accept the appointment as registered agent agent of director's. I hereby accept the appointment as registered agent agent of director's. I hereby accept the appointment as registered agent agent of director's. I hereby accept the appointment as registered agent.  12.	Bray, Jack H. One Urban Centre, 4830 W. Kennedy Blvd.		82	82 Street Address (P.O. Box Number is Not Acceptable)							
### All City ### City	SUITE 740			83							
11. Dursuant 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 agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title a goldcobb   (NOTE Registered Agent when reintating)   DATE	TAMI	PA FL 33609		0.4	City		95	Zin Cr	de		
office or registered agent, or both, in the State of Honda. Such change was authorized by the Corporation's doubt of directors. Thereby accept the appointment as registered agent in a familiar with, and accept the obligations of, Section 607/5056, Florida Statutes required when reinistating)  12.					•		.   `				
12.	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.										
12.	SIGNATURE		WOTE Re-			DATE					
DP			(NOTE: Reg		signature it	equired which remotering)	ID DIRE	CTOR	S IN 12		
BRAY, JACK H.  STREETADORESS  4830 W. KENNEDY BLVD.  TAMPA FL  13 STREETADORESS  TAMPA FL  14 CITY-ST-ZP  TAMPA FL  14 CITY-ST-ZP  TAMPA FL  15 CITY-ST-ZP  TAMPA FL  15 CITY-ST-ZP  TAMPA FL  16 CITY-ST-ZP  TAMPA FL  17 CITHE  18 CITY-ST-ZP  TAMPA FL  18 CITY-ST-ZP  TAMPA FL  19 CITY-ST-ZP  TAMPA FL  10 Change   Addition   Change   Change   Addition   Change   Change   Change   Addition   Change   Change   Change   Change   Change   Change   C			DELETE			7,001110107011110120110111101111					
STREET ADDRESS   4830 W. KENNEDY BLVD.		- UI									
TAMPA FL	!			13STREET	ADDRESS						
TITLE VS DELETE 21 TITLE	;								İ		
NAME			DELETE				Cha	nge	Addition		
A830 W. KENNEDY BLVD.   23 STREET ADDRESS   2.4 CITY-ST-ZIP		` <u>`</u>		2.2 NAME							
TAMPA FL		· · · · · · · · · · · · · · · · · · ·		2.3 STREET	ADDRESS						
TITLE VAS GREEN, DANIEL B.  NAME GREEN, DANIEL B.  STREET ADDRESS CITY-ST-ZIP  TAMPA FL  TITLE  NAME WEST, DALE A.  4830 W. KENNEDY BLVD., STE 740  DELETE  4.1 TITLE  VEST, DALE A.  4.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  V DELETE  DELETE  DELETE  5.1 TITLE  VINAME  MAME  WIKINSON, J. CURK  4830 W KENNDEDY BLVD. STE 740  DELETE  5.1 TITLE  5.3 STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  DELETE  6.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  DELETE  6.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  Change Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Change Addition	• • • • • • • • • • • • • • • • • • • •	TAMPA FL		2.4 CITY+S	T-ZIP						
### STREET ADDRESS ### AS30 W. KENNEDY BLVD., STE 740    TAMPA FL	TITLE		DELETE	3 1 TITLE			Cha	inge	☐ Addition		
TAMPA FL   34.CITY-ST-ZIP   TAMPA FL   34.CITY-ST-ZIP   TITLE   Change   Addition   Ad	NAME	GREEN, DANIEL B.		32 NAME	j						
TITLE T DELETE 4.1 TITLE	STREET ADDRESS	4830 W. KENNEDY BLVD., STE 740		3.3 STREET	ADDRESS						
NAME NAME NAME VEST, DALE A.  4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITLE V NAME NAME WILKINSON, J. CURK STREET ADDRESS 4830 W KENNDEDY BLVD. STE 740 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP OELETE 6.3 STREET ADDRESS CITY-ST-ZIP CHANGE 6.3 STREET ADDRESS CITY-ST-ZIP  6.4 CITY-ST-ZIP	CITY-ST-ZIP			3.4. CITY-S	T-ZIP						
STREET ADDRESS  TAMPA FL  TITLE  NAME  WILKINSON, J. CURK  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  DELETE  G2 NAME  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP  CHange  Addition  Addition  Change  Addition	TITLE	Ī	] DELETE	4.1 TITLE			[]] Cha	inge	Addition		
TAMPA FL	NAME	WEST, DALE A.		4. 2 NAME							
TITLE V DELETE 5.1 TITLE CANAGE Addition  NAME WILKINSON, J. CURK  52 NAME  53 STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  5.1 TITLE  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  CHANGE  62 NAME  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  6.1 TITLE  6.2 NAME  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP	STREET ADDRESS	4830 W. KENNEDY BLVD., STE 740		4.3 STREET	ADDRESS						
NAME WILKINSON, J. CURK  52 NAME  52 NAME  53 STREET ADDRESS  CITY-ST-ZIP  TAMPA FL  DELETE  61 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  62 NAME  63 STREET ADDRESS  CITY-ST-ZIP  64 CITY-ST-ZIP	CITY-ST-ZIP			4.4 CITY-ST	r-ZIP						
NAME   WILKINSON, J. CORN	TITLE	V	DELETE				∐ Chá	inge	☐ Addition		
1	NAME	· ···									
TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS         CITY-ST-ZIP         6.4 CITY-ST-ZIP	STREET ADDRESS	7000 T. 7.27.11.222 T. 22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				•					
NAME	CITY-ST-ZIP				-ZIP						
STREET ADDRESS  . 6.3 STREET ADDRESS  CITY-ST-ZIP  6.4 CITY-ST-ZIP	TITLE		_) DELETE				Cha	ınge	☐ Addition		
CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME										
UIY-SI-ZIP	STREET ADDRESS										
	CITY-ST-ZIP		- 4 118 · 6 - 41- ·		_	Lis Castian 440 07(2)(i) Florida Statutas   Futbor on	tifu that	tha int	formation		

Country

30

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 empoward to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 to changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: