2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
05-03-2001 90998 022 ***158.75

DOCUMENT # K47458

1. Entity Name
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

C00594166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4890 W. Kennedy Boulevard	4890 W. Kennedy Boulevard
Suite, Apt. #, etc. Suite #850	Suite, Apt. #, etc. Suite #850
City & State Tampa, Florida	City & State Tampa, Florida
Zip 33609-1863 Country USA	Zip 33609-1863 Country USA

4. FEI Number 59-2967878 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BRAY, JACK H. ONE URBAN CENTRE, 4830 W. KENNEDY BLVD. SUITE 740 TAMPA FL 33609	Name Street Address (P.O. Box Number is Not Acceptable) 4890 W. Kennedy Boulevard Suite #850 City Tampa **FL** Zip Code 33609-1863

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BRAY, JACK H. 4830 W. KENNEDY BLVD. TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D. 4890 W. Kennedy Blvd., #850 Tampa, Florida 33609-1863	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS ROSS, SAMUEL K. 4830 W. KENNEDY BLVD. TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/S. 4890 W. Kennedy Blvd., #850 Tampa, Florida 33609-1863	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VAS GREEN, DANIEL B. 4830 W. KENNEDY BLVD., STE 740 TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V 4890 W. Kennedy Blvd., #850 Tampa, Florida 33609-1863	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WEST, DALE A. 4830 W. KENNEDY BLVD., STE 740 TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/T 4890 W. Kennedy Blvd., #850 Tampa, Florida 33609-1863	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WILKINSON, J. CURK 4830 W KENNDEDY BLVD. STE 740 TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	WILKINSON, J. CURT 4890 W. Kennedy Blvd., #850 Tampa, Florida 33609-1863	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Samuel K. Ross 4.25.2001 813-286-4140
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #