## FILED Apr 16, 2002 8:00 am Secretary of State 04-16-2002 90173 010 \*\*\*150.00

2002 U	NIFORM	<b>BUSINESS</b>	<b>REPORT</b>	(UBR
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DOCUMENT # 1. Entity Name

P00000025480

EMERALD TREE, INC.

Principal Place of Business

Mailing Address

POST OFFICE GRAND BAY		POST OFFICE BOX 9 GRAND BAY AL 36541					
2. Principal P	lace of Business	3. Mailing Address					
10052	Ramsey Koad						
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.		<del></del>	DO NOT WRITE IN THIS SPACE			
Grand	Grand Bay, AL City & State			4. FEI Number 63-1248387			Applied For Not Applicable
-36541	Country USA	Zip	Country	<b>5.</b> C	ertificate of Status Desired	□ \$8.75 Fee Req	Additional uired
	6. Name and Address of Current R	egistered Agent		7. Na	ame and Address of New Regi	stered Agent	
CORPOR	ATION SERVICE COMPANY	Name					
	'S STREET		Street Add	iress (P.O. Bo	x Number is Not Acceptable)		1
	SSEE FL 32301-2525						
(, <u>, , , , , , , , , , , , , , , , , , </u>	000		City			FL Zip C	Code
8. The above	named entity submits this statement for t	he purpose of changing its re-	gistered office or re	egistered Age	nt, or both, in the State of Florida	a.	
8. The above named entity submits this statement for the purpose of changing its registered once or registered agent, or both, in the State of Florida.							
SIGNATURE .	Signature, typed or printed name of registered agent and	d title if applicable. (NGTE: F	ogistered Agent signature	requires when refi	istating)	DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!!  After May 1, 2002  Make Check Payable				0.00	Election Campaign Financ Trust Fund Contribution.		5.00 May Be ded to Fees
11.	OFFICERS AND D	IRECTORS	12.	ADD	ITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 11
TITLE	PD	☐ Delete	TITLE			Chan	ge 🔲 Addition
NAME STREET ADDRESS	HOWELL, NEAL		NAME STREET ADDRESS				
CITY-ST-ZIP	POST OFFICE BOX 9 GRAND BAY AL 36541		CITY-ST-ZIP				
TITLE	ST	☐ Delete	TITLE			Chang	ge 🔲 Addition
NAME	HOWELL, HEATHER		NAME				
STREET ADDRESS CITY-ST-ZIP	8651 GRAND COUNTRY LANE		STREET ADDRESS CITY-ST-ZIP				}
TITLE	GRAND BAY AL 36541	Delete	TITLE	<del></del>	, was 1 and 1 and 2 and 2	Chang	je 🔲 Addition
NAME			NAME				
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP				
CITY-ST-ZIP	<u> </u>		TITLE		·	Chang	ge 🔲 Addition
NAME		LLJ Delete	NAME			L_1 CHAIN	geAddition
STREET ADDRESS	ne .		STREET ADDRESS				
CITY-ST-ZIP \			CITY-ST-ZIP				
TITLE	The water of the Contract	☐ Delete	TITLE			Chang	ge 🔲 Addition
NAME STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP	TOTAL TOTAL	r r peak yang te oom tak.	CITY-ST-ZIP	* · ·			
TITLE	र विश्वकारिक पूर्ण	☐ Delete	TITLE	72 · 33		Chang	ge Addition
NAME			NAME	- :	•		
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP		* PP	CITY-ST-ZIP	11-0-4	(0.07/0V) Flacida Octobri		

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 squired 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:

Daytime Phone #