

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90062 031 ***150.00

DOCUMENT # P00000040787

1. Entity Name

GREENWICH COMMONS REALTY CORP.

Principal Place of Business

C/O LEE C. SCHMACHTENBERG, P.A.
 1533 SUNSET DRIVE SUITE 201
 CORAL GABLES FL 33143

Mailing Address

C/O LEE C. SCHMACHTENBERG, P.A.
 1533 SUNSET DRIVE SUITE 201
 CORAL GABLES FL 33143

LU051760



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Greenwich Commons

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

14608 43rd St. North #31

City & State

Tampa, FL

4. FEI Number

59-3643791

Applied For
 Not Applicable

Zip

Country

Zip

Country

33613 Hills

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHMACHTENBERG, LEE C
1533 SUNSET DRIVE
SUITE 201
CORAL GABLES FL 33143

7. Name and Address of New Registered Agent

Name
Green Realty Management / Greenwich Commons
 Street Address (P.O. Box Number is Not Acceptable)
14608 43rd St. North #31
 City **Tampa** FL Zip Code **33613**

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

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	D GREEN, STEVEN <input type="checkbox"/> Delete
NAME	405 TARRYTOWN RD. #421
STREET ADDRESS	WHITE PLAINS, N.Y. 10607
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: _____

STEVEN GREEN Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-26-01

Daytime Phone #

914 968-3157

CR2E034 (10/00)

017 (044)