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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200001739 (1)

GREENIES PRODUCE, INC.

Principal Place	e of Business	Mailing Address								
P.O. BOX 11791 TAMPA FL 33680 US		P.O. BOX 11791 TAMPA FL 33680-1791 US								
					THE WAY OF THE PROPERTY MAKES SAIN.	3. Date Incorporated or Qualified 10/29/1992		ate of Last R 21/1996		
<u> </u>	Place of Business	2a. Mailing Address				4. FEI Number		<u> </u>	pplied For	
Sulte, Apt.	# atc	Suite, Apt. #, etc.				59-3154665			ot Applicable Additional	
22	W1 012.	27				5. Certificate of Status Desired		T	Additional equired	
City & State	e	City & State				6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Country	У		8. This corporation has liability for in			. 199.032,	
24	25 9. Name and Address of Current		30			Florida Statutes 10. Name and Address of New Rec		No Agent		
GREI	ENAKER, HAROLD III		81	Τ'n	lame	(A) MINING MINING COMMONDO AT 120	1000.00	ngoin		
	BRANDON LAKES AVENUE		82		troot Adde	ess (P.O. Box Number is Not Acceptable	I~(
	PA FL 33594		<u></u>	31	Ifeet Addie	reat Address (r.o. box number is not Acceptable)				
			83	-					. · · · · <u></u>	
			84	C	ity			85 Zip	Code	
S. S		1 000 1000 FT 11 Oct 4-			•		FL	. `		
11. Pursuand office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State	2 and 607,1508, Florida Statutes of Florida, Such change was au	s, the above thorized b	e-na y the	imed corpo e corporati	oration submils this statement for the puion's board of directors. I hereby accep	arpose of It the app	l changing it pointment as	ts registered registered	
	m familiar with, and accept the obliga	itions of, Section 607.0505, Fiori	ida Statute:	\$.						
SIGNATURE	Signature, typed or printed name of registered agen	nt and little if applicable. (NOTE:)	Flegistored Ag	ent sir	gnature require	ed when reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12	
TITLE	PD	DELETE	1.1 TITLE		_		_	☐ Change	Addition	
NAME	GREENAKER, HAROLD III	·-	1,2 NAME							
STREET ADDRESS	1016 Brandon Lakes avenu Tampa Fl	t	1.3 STREET			1.7				
CITY-ST-ZIP	VDT	DELETE	1.4 CITY - 5 2.1 TITLE	ST-ZIF	-			Change	Addition	
NAME	GREENAKER, ANNE		2.2 NAME						Figure 1	
STREET ADDRESS	1016 BRANDON LAKES AVENU	E	2.3 STREET	t add!	RESS	• •	* *			
CITY-ST-ZIP	TAMPA FL		2. 4 CITY-			•				
TITLE .	\$D	☐ DELETE	3.1 TITLE				,	Change	Addition	
NAME	GREENAKER, LISAANN	.=	3.2 NAME							
STREET ADDRESS	1016 BRANDON LAKES AVENU	E	3.3 STREET		1					
CITY-SY-ZIP TITLE	TAMPA FL	DELETE	3.4. CITY-5	ST-ZII	P			1 1 Change	T Addition	
NAME		L Decen	4.1 TITLE 4.2 NAME					L Change	Addition	
STREET ADDRESS			4.2 NAME		9910					
CITY-ST-ZIP			4 4 CITY-S							
TITLE		DELETE	5.1 1ITLE	21				☐ Change	Addition	
NAME .			5.2 NAME							
STREET ADORESS			5.3 STREET	i addi	RESS					
CITY-ST-ZIP			5.4 CITY - S	\$1 - Z IP	٥					
TITLE		L_ DELETE	6.1 TITLE					L Change	Addition	
NAME	į		6.2 NAME							
STREET ADDRESS CITY-ST-ZIP			6.3 STREET							
	ov certify that the information supplied	with this filing does not qualify	6.4 CITY - S for the exe			in Section 119.07(3)(i), Florida Statutes	Lfurther	r certify that	the	
Information	on indicated on this annual report or su fficer or director of the corporation or t in Block 12 or Block 13 if changed, or	upplemental annual report is true the receiver or trustee empower	e and accu red to exec ess.	urale cute	e and that r	my signature shall have the same legal t as required by Chapter 607, Florida St	effect as	s if made und	der path: that	