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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000001739 (1)

GREENIES PRODUCE, INC.						
						0   10   10   10   10   10   10   10
Principal Plac	ce of Business	Mailing Address			-	IDIN DONUN NUNN 1800EN NNIA 1811 ADDI
P.O. BOX 11791 P.O. BOX 11791						
TAMPA FL 33680 TAMPA FL 33680 US US					DO NOT WRITE IN	THIS SPACE
U\$		us			3. Date Incorporated or Qualified	11110 017102
					10/29/1992	
2. Principal I	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					59-3154665	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State			Fee Required	
City & State		<del> </del>		6. Election Campaign Financing	\$5.00 May Be	
<b>23</b> Zip	Country	<b>28</b> Zip	Country		Trust Fund Contribution	Added to Fees
24	25	29	30		8. This corporation owes or has paid to     Personal Property Tax due June 30	
	g. Name and Address of Current		100		10. Name and Address of New Regis	
G	REENAKER, HAROLD III		B1	Name		
4046 BRANDON LANCO AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)		
TAMPA FL 33594			-	Direct ridgit	333 (1.0. DON HUMBON IS NOT NOCOPILIDAD	
			83			
			84	City		85 Zip Code
				•		FL   -
11. Pursuant	: <b>to the</b> provisions of Sections 607,0502 registered agent, or both, in the State r	and 607.1508, Florida Statut of Florida Statut	es, the above	named corporati	oration submits this statement for the purpon's board of directors. I hereby accept the	pose of changing its registered
agent. I a	am familiar with, and accept the obliga-	tions of, Section 607.0505, Fi	orida Stalutes	ino corporati 3.	on a sound of directors. Thereby accopy is	ne appointment as registered
SIGNATURE						
	Signature, typed or printed harne of registered agon OFFICERS AND			ni signature require		DATE
12.	PD	DELETE	13.		ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	GREENAKER, HAROLD III		1.2 NAME	l		
STREET ADDRESS	1016 BRANDON LAKES AVEN	UE	1.3 STREET	ADDRESS		
CITY-ST-ZIP	TAMPA FL		1.4 CITY - S			
TITLE			2.1 TITLE			Change Addition
NAME	GREENAKER, ANNE		2.2 NAME			
STREET ADDRESS	1016 BRANDON LAKES AVEN	UE	2.3 STREET	ADDRESS {		
CITY-ST-ZIP	TAMPA FL		2.4 CITY - S	ST-ZIP		
TITLE	\$D	DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS	1016 BRANDON LAKES AVEN	UE	3.3 STREET	ADDRESS		
CITY-ST-ZIP	TAMPA FL	T Drugge	3.4. CITY-S	I - ZIP		
TITLE NAME	}	DELETE	4.1 TITLE	1		Change Addition
			4. 2 NAME	0010004		
STREET ADDRESS			4.3 STREET	ł		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S' 5.1 TITLE	1-211		Change Addition
NAME		- section	5.2 NAME	Ì		- Alleganda - Candidat
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-\$T-ZIP	1		5.4 CITY - S			
TITLE		DELETE	6.1 TITLE	<del></del>		Change Addition
NAME	1	—				
	i		6.2 NAME	ļ		i
STREET ADDRESS			6.2 NAME 6.3 STREET	ADDRESS		Ì

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**FILED** 

May 14 1998 8:00am

Secretary of State