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

PROFIT CORPORATION ANNUAL REPORT

1998

22



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P93000075219 (4)

GREENTREE INVESTORS GROUP, INC.

Principal Place of Business Mailing Address 611 W AZEELE STREET 611 W AZEELE STREET TAMPA FL 33606 TAMPA FL 33606 2. Principal Place of Business 2a. Mailing Address 21 Suite, Apt. #, etc. Suite, Apt. #, etc.

27

City & State City & State 6. Election Campaign Financing \$5.00 May Bo 23 28 Trust Fund Contribution Added to Fees Zip Ζip Country 8. This corporation owes or has paid the current year Intangible 24 Yes Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SMITH, H S III 611 W AZEELE STREET Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33606** 83

84 City

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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered age at and sile if applicable. (NOT) Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTOR				DATE	
			13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTO	
TITLE	STDP	☐ DELETE	1.1 TITLE		☐ Change	Addition
NAME	SMITH, H S III		1.2 NAME			
STREET ADDRESS	611 W AZEELE STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL		14 CITY-ST-ZIP			
TITLE		DELETE	21 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			
STREET ADORESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			,
TITLE		DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			ŀ
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		☐ DELE te	4.1 TITLE		☐ Change	☐ Addition
NAME		,	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			ŀ
STREET ADDRESS			5 3 STHEET ADDRESS			
CITY - ST - ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELEY E	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME	annone,	431740 4	12/2
STREET ADDRESS			6.3 STREET ADDRESS	-02/16/98	11092014	2.10

CITY-ST-ZIP ***150.00 6.4 CITY - ST - ZIP 14. 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 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.

/ DO

FILED

Feb 16 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified

10/29/1993

59:3226620

5. Certificate of Status Desired

4. FEI Number