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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

Apr 02 1997 8:00am

Secretary of State

Change

\_\_\_\_ Addition

DOCUMENT # P94000017278 (0)

**GREEN EARTH HOLDINGS, INC.** 

1600 INDEPENDENT SQUARE

**1600 INDEPENDENT SQUARE** 

JACKSONVILLE FL 32202

JACKSONVILLE FL 32202

LOVETT, L D

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

	ice of Business IDENT SQUARE E FL 32202	Mailing Address 1600 INDEPENDENT SQUARE JACKSONVILLE FL 32202-5009 US						
					3. Date Incorporated or Qualified 03/04/1994	3a. Date o 04/22/	of Last Report <b>1996</b>	
2. Principal	Place of Business	2a. Mailing Address 26			4. FEI Number 59-3232420	Applied For Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Country Z(p		ntry  8. This corporation has liability for intangible tax under s. 199. Florida Statutes  Yes No				
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Age	∍nt	
KREIS, ROBERT R. 1600 INDEPENDENT SQUARE JACKSONVILLE FL 32202			8 8 8	2 Street Add	FL 85 Zip Code			
agent. I SIGNATURE	am familiar with, and accept the obligation of repistered agent	tions of, Section 607,0505, FI	orida Statut	es.	poration submits this statement for the p tion's board of directors. I hereby accep ired when reinstating)	DÁTE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			~~····································
TITLE	PD	L_ DELETE	1.1 111(1				Change	Addition [
name Street address			1.2 NAM 1.3 STHE	F I ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL 32202	,	1.4 CITY					
TITLE	VTD WILLIAMS, L D	□ DELCTI	21 THUE	1		L	Change [	Addition
NAME	JAMA MIDERPHIDENT COMME		2.2 NAM					
STREET ADDRESS	JACKSONVILLE FL 32202			ET ADDRESS	94	-		1
CITY-ST-ZIP	VSD	DICETE	2. 4 CITY 3.1 TITLE				Change	Addition
NAME	KREIS, R R	LJ MACH	3.1 HILL 3.2 NAM			L	orango Laf	,
STREET ADDRESS	JAMA MIDEDENIDENT COLLADE			ET ADDRESS				1
CITY-ST-ZIP	JACKSONVILLE FL 32202	•	3.4. CiTy					)
TITLE	D	DELĒTE	4.1 1111.	- a			Change	Addition
NAME	LOEB, K L	* *	4. 2 NAM	lt Ì				Ì
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL 32202		4.4 CiTY	SI ZIP				
TITLE	D	DECEME	5.1 1111 5		70.8		Change 🔲	Addition
MALAC	LOVETT PH	•	E O NIANA	. }				

14. I do 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 eath; 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.

5.3 STREET ADDRESS

5.4 CITY - ST - ZiP

6.3 STREET ADDRESS

SIGNATURE De Welliams L. D. Williams Vicebres Tras 3-70.97 (904)634-8808

6.2 NAME