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Jun 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000024114 (8)**

1. Corporation Name
GREEN EARTH HOLDINGS II, INC.

Principal Place of Business	Mailing Address
1600 INDEPENDENT SQUARE JACKSONVILLE FL 32202 US	1600 INDEPENDENT SQUARE JACKSONVILLE FL 32202 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified: 03/24/1994	
21	26 1 Independent Drive	4. FEI Number: 59-3235844	Applied For / Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 1600	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23	City & State 28 Jacksonville, FL	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / Country 25	Zip 29 32202-5009 / Country 30 USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

KREIS, ROBERT R
1600 INDEPENDENT SQUARE
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1 Independent Drive, Suite 1600

83

84 City: Jacksonville **FL** 85 Zip Code: 32202-5009

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, type or print name of person signing. Corporate title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	LOVETT, W RADFORD II		1.2 NAME	
STREET ADDRESS	1600 INDEPENDENT SQUARE		1.3 STREET ADDRESS	1 Independent Drive, Suite 1600
CITY-ST-ZIP	JACKSONVILLE FL 32202		1.4 CITY-ST-ZIP	Jacksonville, FL 32202-5009
TITLE	VTD	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	WILLIAMS, L D		2.2 NAME	
STREET ADDRESS	1600 INDEPENDENT SQUARE		2.3 STREET ADDRESS	1 Independent Drive, Suite 1600
CITY-ST-ZIP	JACKSONVILLE FL 32202		2.4 CITY-ST-ZIP	Jacksonville, FL 32202-5009
TITLE	VSD	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	KREIS, ROBERT R		3.2 NAME	
STREET ADDRESS	1600 INDEPENDENT SQUARE		3.3 STREET ADDRESS	1 Independent Drive, Suite 1600
CITY-ST-ZIP	JACKSONVILLE FL 32202		3.4 CITY-ST-ZIP	Jacksonville, FL 32202-5009
TITLE		☐ DELETE	4.1 TITLE	DC ☐ Change ☒ Addition
NAME			4.2 NAME	Lovett, R. D.
STREET ADDRESS			4.3 STREET ADDRESS	1 Independent Drive, Suite 1600
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Jacksonville, FL 32202-5009
TITLE		☐ DELETE	5.1 TITLE	AS ☐ Change ☒ Addition
NAME			5.2 NAME	Mello, Jeannine
STREET ADDRESS			5.3 STREET ADDRESS	1 Independent Drive, Suite 1600
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Jacksonville, FL 32202-5009
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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.

SIGNATURE: L.D. Williams, Vice Pres 6-1-98 (904)634-8808