

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

10f2

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**FILED**  
97 AUG -5 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P94000034093 (2)**  
1. Corporation Name  
**GREEN KEEPERS, INC.**



Principal Place of Business <b>3616 BEAULCERC ROAD JACKSONVILLE FL 32257-4922 US</b>	Mailing Address <b>P.O. BOX 57883 JACKSONVILLE FL 32241-7883 US</b>
---	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

3. Date Incorporated or Qualified <b>05/02/1994</b>	3a. Date of Last Report <b>04/24/1996</b>
4. FEI Number <b>59-3246036</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**EUGENE H. WOOD V (GREENKEEPERS)  
3616 BEAULCERC ROAD  
JACKSONVILLE FL 32257**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when resigning) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	VP
NAME	<b>BOWMAN, ROBERT</b>
STREET ADDRESS	<b>505 GROVE PARK BLVD</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>
TITLE	P
NAME	<b>DEBRA RUSSELL</b>
STREET ADDRESS	<b>505 GROVE PARK BLVD</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>
TITLE	P
NAME	<b>WOOD, JANIS L.</b>
STREET ADDRESS	<b>3616 BEAULCERC ROAD</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>
TITLE	VP
NAME	<b>WOOD V, EUGENE H.</b>
STREET ADDRESS	<b>3616 BEAULCERC ROAD</b>
CITY-ST-ZIP	<b>JACKSONVILLE FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>300002261979--6</b>
1.3 STREET ADDRESS	<b>-08/08/97--01108--001</b>
1.4 CITY-ST-ZIP	<b>***165.00 ***165.00</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 *Janis L Wood Pres* 7-28-97 904448-0021

CR2E034 (4/97)

20f2



July 25, 1997

To Whom it May Concern:

This is in reference to Green Keeper's Inc. late payment of our 1997 Profit Corporation Annual Report. In the middle of July we received a packet stating we were now on 2<sup>nd</sup> notice. This was a big surprise to us as we are very competent with our bill paying methods, and were quite upset with the possibility of failing to pay. As we reviewed our records it was apparent to us that we never received a first statement.

We promptly called your office to set the matter straight. Enclosed is a check for \$165.00. This is the amount we were told to send.

Sincerely,

*James L. Wood*  
President