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

**CORPORATION** ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000082997 (5)

TREE GREEN D.B.L., INC.

**FILED** Mar 11 1998 8:00am Secretary of State

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					I IQDIIQDI KIR KUKI DIDIK DEKI QUKI BERK DAN		<del>        </del>
Principal Place		Mailing Address			, , , , , , , , , , , , , , , , , , , ,		
8106 PAMLICO ST. 8106 PAMLICO ST.							
ORLANDO FL	32817	ORLANDO FL 32817			DO NOT WRITE IN TH	IIS SPACE	
					3. Date Incorporated or Qualified		
					11/14/1994		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21 1699	52 Bearle Pd	26 8106 Pam	lico	St	59-3282511	— <del></del>	t Applicable
Suite, Apt. #	l, etc.	Suite, Apt. #, etc.		<del></del> -		\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee Re	beriupe
City & State City & State			<b>J</b>	· .	6. Election Campaign Financing	\$5.00	May Be
23 VVa	ndo FL	28 Orlando	<u>_</u>	<u>· L</u>	Trust Fund Contribution	Added t	to Fees
Zip	Country	793017	Cour	ntry	8. This corporation owes or has paid the	current year Int	angible
24 36 86	10  25 USA		30	USA	Personal Property Tax due June 30.		No
	9. Name and Address of Current	Registered Agent		<b>64</b> 1 11	10. Name and Address of New Register	ed Agent	
	H, ROBERT M		1	81 Name			
	08 PAMLICO ST.		İ	82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	<del></del>	
OR	LANDO FL 32817		ļ				
			l	63			
			ŀ	84 City		85 Zip (	Code
						▝▙▕▕▕	1
11. Pursuant le	o the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the at	ove-named c	orporation submits this statement for the purpos	e of changing it	s registered
agent I ar	n familiar with, and accept the obligat	ions of Section 607.0505, Flo	rida State	ites.	oration's board of directors. I hereby accept the	appointment as	Togratored
SIGNATURE .							
	Signature, typed or printed harris of espetimed agent			Agent signaturo re	equired when reinstating) DAT		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D Stoll Boncot M	DELETE	1.1 TU	1		Change	☐ Addition
NAME	FISH, ROBERT M		1.2 NA				l
STREET ADDRESS	8106 PAMUCO ST.			REET ADDRESS			ļ
CITY-ST-ZIP	ORLANDO FL 32817	The second		Y-SI-ZIP		T 7.	<u> </u>
TITLE	D	DELETE	21 111	ł		Change	Addition
NAME	FISH, MARY ALICE		2.2 NA	ME			
STREET ADDRESS	8106 PAMLICO ST.		2.3 \$11	REET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32817			IY-ST-ZIP			
TITLE		☐ DELETE	3.1 TIT			Change	Addition
NAME .			3.2 NA	ME )		•	. 1
STREET ADDRESS			3.3 \$11	REET ADDRESS			l
CITY-ST-7IP			_	Y-ST-ZIP			
TITLE		☐ DELETE	4.1 1(1	LE		Change	☐ Addition
NAME			4. 2 N/	ME			
STREET ADDRESS			4.3 STI	REET ADDRESS			į
CITY-ST-ZIP			4.4 CIT	Y-\$T-ZIP			
TITLE		☐ DELETE	5.1 T(T	l£		☐ Change	☐ Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 \$1	REET ADDRESS			}
CITY-ST-ZIP			5 4 CI	Y-ST-ZIP			
TITLE		☐ DELF1E	61 Til	LE	<del></del>	Change	Addition
NAME			62 NA	ME .			
STREET ADDRESS			63 ST	REET ADDRESS			
CITY-ST-ZIP			64 CIT	Y-S1-ZIP			
14. I hereby c	ertify that the information supplied wit	this filling does not qualify fo	r the exe	mption stated	in Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the	information

or director of the corporation of the receiver or trustee empowers 12 or Block 13 if changed, or on an attachment with an address.

ATURE: WWW CLUCK TSA is frie and accurate and that my signature shall have the same legal effect as it made under oath; that it am ar Empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in