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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000003681 (0) DOCUMENT #

GREENRIDGE CORPORATION

Principal Place of Business

Mailing Address

FILED Mar 31 1998 8:00am Secretary of State



8046 BEACH BOULEVARD **8046 BEACH BOULEVARD** JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/13/1995 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 464 STIMERS 627/ST. 59-3300867 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing FL32217 JACKSONVILLE, FL32217 28 VACKBUVILLE 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. □ No 24 25 30 Personal Property Tax due June 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Ř1 Name RUBY, TENA P 105 MEETING WAY 82 PONTE VEDRA BCH FL 32082 83 84 ics on ville 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 reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DP DELETE Change Addition TITLE 1.1 TITLE RUBY, TENA P NAME 1.2 NAME 6104 SAN JOSE BLVO-WAT 105 MEETING WAY STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE, FL32217 PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DVST DELETE Addition TITLE 2.1 TITLE RUBY, PAUL M NAME 2.2 NAME 6/04 SAN JOIK BWO-WEST 105 MEETING WAY STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FLBDUT PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ___ Change ☐ Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 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 ar

2/1 190 /9-1737-10