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Apr 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000046506 (8)

1. Corporation Name  
M. GREENE, INC.

Principal Place of Business  
3613 EMERSON ST.  
JACKSONVILLE FL 32208  
US

Mailing Address  
601 SOUTH SEMORAN BLVD.  
ORLANDO FL 32807



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/08/1995	
21		26	142 S. Semoran Blvd.	4. FEI Number	59-3323101
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28	Orlando, Fl.	7. 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	
24	Zip	25	Country	29	32807
				30	Country
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
GREENE, RANDALL B 601 S SEMORAN BLVD ORLANDO FL 32807				81 Name Schwartz, William H.	
				82 Street Address (P.O. Box Number is Not Acceptable) 142 S. Semoran Blvd.	
				83	
				84 City Orlando, FL 85 Zip Code 32807	

11. Pursuant to the provisions of Sections 607.0502 and 607.1502 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 607.0502, Florida Statutes.

SIGNATURE *William H. Schwartz* William H. Schwartz 3-4-98  
Signature (If not, please print name of registered agent and if not applicable) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD	1.1 TITLE	P/T/S/D
NAME	GREENE, RANDALL B DO	1.2 NAME	Schwartz, William H.
STREET ADDRESS	601 SOUTH SEMORAN BLVD.	1.3 STREET ADDRESS	142 S. Semoran Blvd.
CITY-ST-ZIP	ORLANDO FL 32807	1.4 CITY-ST-ZIP	Orlando, Fl. 32807
TITLE		2.1 TITLE	VP
NAME		2.2 NAME	Zeman, Linda M.
STREET ADDRESS		2.3 STREET ADDRESS	142 S. Semoran Blvd.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Orlando, Fl. 32807
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 an address.

SIGNATURE: *William H. Schwartz* William H. Schwartz 3-4-98 407-380-1951

CR2E034 (10/97)