

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

FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000067757 (1)
1. Corporation Name
GREENSBORO REALTY, INC.

Principal Place of Business 2170 SR 434 W. SUITE 400 LONGWOOD FL 32778	Mailing Address 2170 SR 434 W. SUITE 400 LONGWOOD FL 32778-5017
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2. Principal Place of Business 21 Suite, 434 W. SR 330 City & State 30 Zip Country	2a. Mailing Address 26 Suite, 434 W. SR 330 City & State 30 Zip Country
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3. Date Incorporated or Qualified 08/25/1995	3a. Date of Last Report 04/23/1996
4. FEI Number 59-3332933	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**PIERCEFIELD, DAVID S
2401 ALGMA AVE. 230 Lookout Place
SUITE 200
WINTER PARK FL 32789 *Maitland, FL 32751***

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DPST	<input type="checkbox"/> DELETE
NAME	HACHENBERGER, DONALD J	
STREET ADDRESS	2170 WEST S.R. 434 SUITE 400	
CITY - ST - ZIP	LONGWOOD FL 32778	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HACHENBERGER, GLENDA	
STREET ADDRESS	2170 WEST S.R. 434 SUITE 400	
CITY - ST - ZIP	LONGWOOD FL 32778	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	KENNEDY, BURTON	
STREET ADDRESS	115 B POMONA DR.	
CITY - ST - ZIP	GREENSBORO NC 27407	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	Suite 330
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	Suite 330
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" 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	000002159640
6.3 STREET ADDRESS	-04/30/97--01002--015
6.4 CITY - ST - ZIP	***165.00

14. I do 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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **REQUIRED** Date: **4/10/97** 407-869-7664

CR2E034 (9/96)