

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

FILED
May 22 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 # P96000005632 (0)

1. Corporation Name
D. L. GREENE, INC.



Principal Place of Business 4411 BEE RIDGE ROAD, #585 SARASOTA FL 34233	Mailing Address 4411 BEE RIDGE ROAD, #585 SARASOTA FL 34233-2514
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3. Date Incorporated or Qualified 01/18/1996	3a. Date of Last Report
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2. Principal Place of Business	2a. Mailing Address
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21 2199 Princeton Street	26 Suite, Apt. #, etc.
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22 City & State 23 Sarasota FL 34237	27 City & State
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24 Zip 25 Country	28 Zip 29 Country	30
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4. FEI Number 65-0636294	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENE, DEBORAH L
4411 BEE RIDGE ROAD, #585
SARASOTA FL 34233

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	Pres	<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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1.2 NAME	Deborah L. Greene	
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1.3 STREET ADDRESS	2199 Princeton Street	
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1.4 CITY - ST - ZIP	Sarasota FL 34237	
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2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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2.2 NAME		
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2.3 STREET ADDRESS		
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2.4 CITY - ST - ZIP		
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3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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3.2 NAME		
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3.3 STREET ADDRESS		
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3.4 CITY - ST - ZIP		
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4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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4.2 NAME		
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4.3 STREET ADDRESS		
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4.4 CITY - ST - ZIP		
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5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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5.2 NAME		
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5.3 STREET ADDRESS		
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5.4 CITY - ST - ZIP		
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6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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6.2 NAME		
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6.3 STREET ADDRESS		
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6.4 CITY - ST - ZIP		
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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 if changed, or on an attachment with an address.

SIGNATURE: X DEBORAH L. GREENE

4-26-97 252-5949

0425748

CR2E034 (9/96)



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

May 7, 1997

D. L. GREENE, INC.
4411 BEE RIDGE ROAD, #585
SARASOTA, FL 34233

SUBJECT: D. L. GREENE, INC.
Ref. Number: P96000005632

Please be advised, we have received your document for the above corporation; however, the document **has not been filed** and is being returned for the following:

The signature(s) on the report must be original and in ink. A photocopy or stamped signature is not acceptable.

TO AVOID THE \$385.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (904) 488-9000.

ANNUAL REPORTS SECTION

Letter number: 397A00024271

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