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



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9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 4411 BEE RIDGE ROAD, #585 SARASOTA FL 34233 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Suctions 627,0502 and 607,1508, Florida Statules, the above named corporation submits this statement for the purpose of changing its registered agent. I am tambifer with, and except the collegations of Section 607,0505, Florida Statules, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am tambifer with, and except the collegations of Section 607,0505, Florida Statules, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am tambifer with, and except the suppointment as registered agent. I am tambifer with and except the proporations of Section 607,0505, Florida Statules, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am tambifer with and except the proporations of Section 607,0505, Florida Statules, the above named corporation's board of directors. I hereby accept the appointment as registered agent. I am tambifer with and the proporation's board of directors. I hereby accept the appointment as registered agent. I am tambifer with an except and a street appointment as registered agent. I am tambifer with an except and a street appointment as registered agent. I am tambifer with an except and a street appointment as registered agent. I am tambifer with an except and a street appointment as registered agent. I am tambifer with a street appointment as registered agent. I am tambifer with a street appointment as registered agent. I am tambifer with a street appointment as registered agent. I am tambifer with a street appointment as registered agent. I am tambifer with a street appointment as registered agent. I am tambifer with a street appointment		SOFA TH			······································	c _o	untry	· · · · · · · · · · · · · · · · · · ·			as liability for i		tax under s	
GREENE, DEBORAH L	24				d Agent	30	_							
SARASOTA FL 34233	, GR				· 		81	Name						
Rote Processions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporations submits this statement for the purpose of Changing Its register of agent, or both, in the State of Florida Such change was euthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505, Florida Statutes. Signature Proceeding Procedure							82	Street	Addres	s (P.O. Box Number is	Not Acceptab	le)		
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 register of lice or registered agent, or both, in the State of Florida. Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered signal and the approximation of the purpose of changing its register of eight of the purpose of changing its register of signal and the approximation of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of the purpose of changing its register of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight of the purpose of changing its register of eight	- SAI	rasota FL 34	233				83			· · · · · · · · · · · · · · · · · · ·				
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 register of signer in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the applications of Section 607,0505, Florida Statutes. SIGNATURE 2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	•							City		······································			as Zin (Code .
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14. I do hereby certify that the information supplied with this filling does not qualify for the examption stated in Section 110 07(9V/). Florida Statutas I further positive that		<u> </u>			,				<u> </u>				· ·····	
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; I am an officer or director of the co-pyration or the receives or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changes, or on an attachment with an addresse!	informat	eby certify that the ion indicated on	ie information supplie this annual report or	ia with this fil supplementa	ing does not qua I annual report is	true and	acci	mption s irate and	itated in that m	s section 119.07(3)(i), y signature shall have	riorida Statute: the same lega	s. I further l effect as	certify that if made und	ine der oath; that

FILED



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 <u>has not been filed</u> 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

/jf

Letter number: 397A00024271