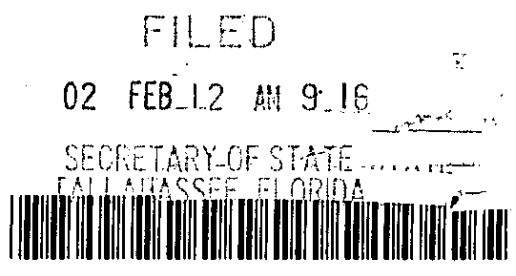


2002 UNIFORM BUSINESS REPORT (UBR)

0373856 AV

DOCUMENT # P97000050610

1. Entity Name
GREENLEAF HOMES, INC.



Principal Place of Business 8949 LANTANA ROAD LAKE WORTH FL 33467	Mailing Address 123 NW 13TH ST. SUITE 300 BOCA RATON FL 33432
---	---

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

City & State	City & State	4. FEI Number 65-0762713	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**SHAPIRO, DAVID
123 NW 13TH ST., STE. 300
BOCA RATON FL 33432**


7. Name and Address of New Registered Agent

Name **JOHN A. KRAYNICK**

Street Address (P.O. Box Number is Not Acceptable)
123 NW 13TH ST, SUITE 300

City **BOCA RATON** FL Zip Code **33432**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE  **JOHN A. KRAYNICK, VICE PRESIDENT** 2-11-02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE DP	<input checked="" type="checkbox"/> Delete
NAME ENGELSTEIN, ALEC	
STREET ADDRESS 123 NW 13TH ST., #300	
CITY-ST-ZIP BOCA RATON FL 33432	
TITLE DV	<input type="checkbox"/> Delete
NAME KRAYNICK, JOHN A	
STREET ADDRESS 123 NW 13TH ST., STE. 100	
CITY-ST-ZIP BOCA RATON FL 33432	
TITLE VSTD	<input checked="" type="checkbox"/> Delete
NAME SHAPIRO, DAVID	
STREET ADDRESS 123 NW 13TH ST., STE. 100	
CITY-ST-ZIP BOCA RATON FL 33432	
TITLE DV	<input type="checkbox"/> Delete
NAME MCADEN, TOMMY L	
STREET ADDRESS 123 NW 13TH ST., STE. 100	
CITY-ST-ZIP BOCA RATON FL 33432	
TITLE DV	<input type="checkbox"/> Delete
NAME DELIKANAKIS, YANNIS	
STREET ADDRESS 123 NW 13TH ST., STE. 100	
CITY-ST-ZIP BOCA RATON FL 33432	
TITLE VAS	<input type="checkbox"/> Delete
NAME HUBENAK, HOLLY A	
STREET ADDRESS 123 NW 13TH ST., STE. 100	
CITY-ST-ZIP BOCA RATON FL 33432	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME MON, ANTONIO B.	
STREET ADDRESS 4000 HOLLYWOOD BLVD. SUITE 500-N	
CITY-ST-ZIP HOLLYWOOD, FL 33021	
TITLE VST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME LEIKERT, PAUL	
STREET ADDRESS 123 NW 13TH ST. SUITE 300	
CITY-ST-ZIP BOCA RATON, FL 33432	
300005022333-5 -02/28/02-01091-004 ***158.75 ***158.75	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **PAUL LEIKERT, V.P.** 2-11-02 561-391-4012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)