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

**PROFIT** CORPORATION. ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # \$54281**

W.D. GREENE LAND SURVEY			
Principal Place of Business	Mailing Address		
14391 SCRUB OAK LN BROOKSVILLE FL 34613	600 WEST JEFFERSON STREET BROOKSVILLE FL 34601 US	DO NOT WRI	
		<ol> <li>Date Incorporated or Qualifed 06/01/1991</li> </ol>	
2. Principal Place of Business 600 W.Jefferson St 21 Brooksville, Florid	2a. Mailing Address	4. FEI Number 65-0266895	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired	
City & State	City & State	Election Campaign Financing     Trust Fund Contribution	
Zip Country	Zip Country 29 30	This corporation owes the curr Personal Property Tax.	
	- 15 14 14 14	40 Name and Address of Naw	

## FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90043 007 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

Žip	Country	Zip	(	Country		8. This corporation owes the currer	nt year Intang	jible	_	
4]	25	29	30			Personal Property Tax.		Yes	□No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
GREENE, WILLIAM D. 14391 SCRUB OAK LN										
BROOKSVILLE FL 34613			83							
				100						
					City				Code	
office or :	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	Florida, Such char	ide was author	izea by the	amed corp e corporation	oration submits this statement for the p on's board of directors. I hereby accept	urpose of cn the appointn	anging its nent as re	egistered egistered	
SIGNATURE			WOTE O			d when reinstalled	DATE	<del>_</del>	· [	
	Signature, typed or printed name of registered agent a OFFICERS AND			13.	gnature require	d when reinstating)  ADDITIONS/CHANGES TO OFFI		DIRECTO	DRS IN 12	
12.	PD OFFICERS AND			.1 TITLE		ADDITIONO GIANTOZO TO GITT		] Change	Addition	
TITLE	GREENE, WILLIAM D.	٠.		.2 NAME	1		_		_	
IAME	44004 CCDUB OAK IN				NOCE DE					
STREET ADDRESS				.3 STREET AL						
CITY-ST-ŽIP	BROOKSVILLE FL			.4 CITY-ST-Z	IP		г	Change	☐ Addition	
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AME										
STREET ADDRESS	3			3.3 STREET AL					i	
CITY-ST-ZIP				4 CITY-ST-Z	IP			7.05	□ Addition	
TITLE			725516	S.1 TITLE			L	Change	☐ Addition	
NAME				5.2 NAME	- 1					
STREET ADDRESS	s <sup>†</sup>		6	3.3 STREET AL	DDRESS					
CITY-ST-ZIP	<u></u>			6.4 CITY-ST-Z						
14. I hereby	certify that the information supplied with	this filing does not	qualify for the	exemption	stated in S	Section 119.07(3)(i), Florida Statutes. I	further certify	that the	intormation	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under dail; that I am ar 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, with all other like empowered.