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Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 721685

1. Corporation Name  
MORGANWOODS GREENTREE, INC.

Principal Place of Business  
% WISE PROPERTY MGMT. INC.  
7628 N 56TH ST. STE 8  
TAMPA FL 33617  
US

Mailing Address  
% WISE PROPERTY MGMT. INC.  
7628 N 56TH ST. STE 8  
TAMPA FL 33617  
US



2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 09/13/1971
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 23-7205926 Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SPIVEY, WILLIAM C. % WISE PROPERTY MANAGEMENT INC. 7628 N 56TH ST #8 TAMPA FL 33617		81 Name	85 Zip Code
		82 Street Address (P.O. Box Number is Not Acceptable)	FL
		83	
		84 City	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	PULLARA, PHIL 7302 BAJA CT TAMPA FL	<input type="checkbox"/> DELETE	1.1 TITLE D PULLARA, PHIL 7302 BAJA COURT TAMPA, FL 33634 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD	BALL, SHARON 7205 LAGUNA COURT TAMPA, FL 00000 33615	<input type="checkbox"/> DELETE	2.1 TITLE PD STALDER, CHARLOTTE 7201 SAN LUIS COURT TAMPA, FL 33634 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D	HUMES, MADGE 7201 LAGUNA CT. TAMPA FL 33634	<input type="checkbox"/> DELETE	3.1 TITLE SD NAVARRO, JANE 6905 SOLEDAD CT TAMPA, FL 33615 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D	SCHULZE, RAY 7203 SAN LUIS CT TAMPA FL 33634	<input type="checkbox"/> DELETE	4.1 TITLE D HORTON, VIVIAN 7115 EL DORADO CT TAMPA, FL 33615 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE TD	HAFERS, STAN 8301 TERRACE WOOD CIR TAMPA FL 33615	<input type="checkbox"/> DELETE	5.1 TITLE D DILLON, ALICE 7317 BAJA CT TAMPA, FL 33634 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D	STANLEY, TINA 7601 CORTEZ COURT TAMPA FL 33615	<input checked="" type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

14. 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 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 617, 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.

SIGNATURE: [Signature] DATE: 4/11/99 DAYTIME PHONE: 884-2284

CR2E037 (1/98)