2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739938

FILED Apr 27, 2009 Secretary of State

Entity Name: EVERGREEN PROPERTY OWNERS ASSOCIATION, INC

Current Principal Place of Business: New Principal Place of Business:

3218 SW ISLAND WAY PALM CITY, FL 34990

Current Mailing Address: New Mailing Address:

C/O BRISTOL MGMT 543 NW LAKE WHITNEY PLACE STE 101 PORT SAINT LUCIE, FL 34986

FEI Number: 59-2369464 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSS, DEBORAH L ESQ. 759 S. FEDERAL HIGHWAY #212 STUART, FL 34994 US

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:

Flecture Cinneture of Decistored Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 SD () Delete
 Title:
 S (X) Change () Addition

 Name:
 CARTER, DARLA
 Name:
 CARTER, DARLA

 Address:
 4161 SW BIMINI CIR N
 Address:
 4161 SW BIMINI CIR N

Address: 4101 SW BIMINI CIR N

City-St-Zip: PALM CITY, FL 34990

City-St-Zip: PALM CITY, FL 34990

 Address:
 4971 SW BIMINI CIR, N
 Address:
 4305 SW BIMINI CIRCLE SOUTH

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 PALM CITY, FL 34990

Title: D () Delete Title: VP (X) Change () Addition Name: MCADOO, JOHN Name: TOZZO, JUNE

Address: 4993 SW BERMUDA WAY Address: 5192 SW BIMINI CIRCLE NORTH

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990

Title: TD () Delete Title: T (X) Change () Addition Name: WICK, DALE Name: WICK, DALE

 Address:
 4975 SW BIMINI CIR S
 Address:
 4975 SW BIMINI CIR S

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 PALM CITY, FL 34990

Title: D () Delete Title: D (X) Change () Addition

 Name:
 WALSH, JEFF
 Name:
 MICHALISIN, NICK

 Address:
 4305 SW BIMINI CIR, S
 Address:
 3251 SW ISLAND WAY

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFF WALSH P 04/27/2009