

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 10, 2009
Secretary of State**

DOCUMENT# 741733

Entity Name: EVERGREEN HOMES VILLAGE HOMEOWNERS ASSOCIATON, INC.

Current Principal Place of Business:

13800 SW 144 AVE RD
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13800 SW 144 AVE RD
MIAMI, FL 33186

New Mailing Address:

FEI Number: 59-2350354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUITS, STEPHEN E
13800 SW 144 AVE RD
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ABBOTT, DONALD
Address: 14046 SW 58TH LANE
City-St-Zip: MIAMI, FL 33183

Title: TD () Delete
Name: PADILLA, ENRIQUE
Address: 5702 SW 140 AVE
City-St-Zip: MIAMI, FL 33183

Title: VP () Delete
Name: KHAN, MOHAMMAD
Address: 14046 SW 57 TERRACE
City-St-Zip: MIAMI, FL 33183

Title: SD () Delete
Name: DELAPAZ, LOURDES
Address: 13900 SW 56TH LN
City-St-Zip: MIAMI, FL 33183

Title: DD () Delete
Name: ABBOTT, GLORIA
Address: 14046 SW 58TH LN
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: CASTRO, PIERRE
Address: 14005 SW 56 LANE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: DELAPAZ, LOURDES
Address: 13900 SW 56 LANE
City-St-Zip: MIAMI, FL 33183

Title: DD (X) Change () Addition
Name: SANTOS, GREGORIO
Address: 14061 SW 57 TERRACE
City-St-Zip: MIAMI, FL 33183

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DD (X) Change () Addition
Name: CASTRO, PIERRE
Address: 14005 SW 56 LANE
City-St-Zip: MIAMI, FL 33183

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: DONALD ABBOTT

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date