

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002109

FILED
Apr 25, 2008
Secretary of State

Entity Name: HEATH EVANS FOUNDATION, INC.

Current Principal Place of Business:

183 SANDPIPER AVENUE
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

1128 ROYAL PALM BEACH BOULEVARD
276
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 20-4399531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FREEMAN, TERRENCE N II
600 NORTHLAKE BLVD
NORTH PALM BEACH, FL 33408 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: D () Delete
Name: RICHARDSON, JOHN
Address: 3836 TIMBERLINE WAY
City-St-Zip: BIRMINGHAM, AL 352473

Title: D () Delete
Name: THOMAS, KEITH
Address: 2871 BRIARFIELD LANE
City-St-Zip: MOBILE, AL 36693

Title: D () Delete
Name: WILLIAMS, CHETTE
Address: 1622 BRADFORD LANE
City-St-Zip: AUBURN, AL 36830

Title: D () Delete
Name: EVANS, BETH AN
Address: 8077 MAN-O-WAR RD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: EVANS, BRYAN H
Address: 8077 MAN-O-WAR RD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: O () Change (X) Addition
Name: MARTIN, SUE A MRS.
Address: 183 SANDPIPER AVENUE
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: SUE MARTIN

O

04/25/2008

Electronic Signature of Signing Officer or Director

_____ Date