2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 22, 2006 8:00 am Secretary of State

					5 Secretary of State			
DOCUMENT # N9400000923 1. Entity Name THE EVERGLADES FOUNDATION, INC.					03-22-2006 90018 046 ****61.25			
	Change b	CONTRACTOR OF THE PARTY OF THE						
Principal Place of Business 1645 PALM BEACH LAKES BLVD STE 480 WEST PALM BEACH, FL 33401 Change both 10 2:3 lekw Mailing Áddress 1645 PALM BEACH LAKES BLV STE 480 WEST PALM BEACH, FL 33401					 		1 11111 11111 11211 11	11 81 81 188 1
2. Principal Place of Business I BOOL Old Cutter Road Suite, Apt. #, etc.		3. Mailing Address 18001 Old Cutter Road Suite, Apt. #, etc.		ad				
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 625		03152006 C	hg-NP CR2E	037 (11/05)		
City & State		_ City & State			4. FEI Number		Ap	plied For
Palmetto Bay, FL			Palmetto Bay, FL		59-322889	99		t Applicable
Zip 33157		Zip 33157	Miami Miami		5. Certificate of St		\$8.75 Add Fee Required	
Name and Address of Current Registered Agent				Name	7. Name and Add	Iress of New Registere		
SMITH, ROBERT C EVERGLADES FOUNDATION				Name Smith Robert C. Everclades foundation Street Address (P.O. Box Number is Not Acceptable)				
1645 PALM BEACH GARDENS BLVD STE 480 WEST PALM BEACH, FL 33401				18001 Old Cyther ROAD				
VVEST FALIVI DEAGT, FE 93401				Suite 625				
::				Palmeth	o Bay	F	L 3318	7
8. 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. I am familiar with, and accept								
the obligations of registered agent.								
SIGNATURE Rob Smith President Everylades Foundation 3/18/2006								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to)	
Due by May 1, 2006 Trust Fund Contribution.					Added to Fees	Florida Der	artment of St	ate
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	10
TITLE	SD	☐ Delete	TITLE				Change	☐ Addition
NAME STREET ADDRESS	MILLS, JON C 2727 NW 58TH BLVD		name Street a	INDRESS				
CITY-\$T-ZIP	GAINESVILLE, FL 32806		CITY-ST-	1				
TITLE	VCD	☐ Delete	TITLE				☐ Change	Addition
NAME	BARLEY, M L		NAME					
STREET ADDRESS CITY-ST-ZIP	11 DELEON AVE ISLAMORADA, FL 33036		STREET A					
TITLE	P	☐ Delete	TITLE	-74	iden !		Change	☐ Addition
NAME	SMITH, ROBERT C	L Delete	NAME	Smi	TA Robert C	, D (2 -2.6		Addition
STREET ADDRESS	1		STREET A		old cutter	Road, Suite 62	5	
CITY-ST-ZIP	WEST PALM BEACH, FL 33401		CITY-ST-					,
TITLE NAME				-ZIP Palw	netto Bay, 1	FL 33157		
	TD	☐ Delete	TITLE	-ZIP YAIW	netto Bay, 1	FL 33157	☐ Change	Addition
STREET ADDRESS		☐ Delete			netto Bay, 1	FL 33157	☐ Change	Addition
l	TD PITTS, DOUGLAS W SR.	☐ Delete	TITLE NAME	DORESS	netto Bay, I	FL 33157	☐ Change	Addition
STREET ADDRESS	TD PITTS, DOUGLAS W SR. 701 BRICKELL AVE. MIAMI, FL 331312822 VCD	☐ Delete	TITLE NAME STREET A CITY-ST-	DORESS	netto Bay, I	FL 33157	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	TD PITTS, DOUGLAS W SR. 701 BRICKELL AVE. MIAMI, FL 331312822 VCD REED, NATHANIEL P		TITLE NAME STREET A CITY-ST- TITLE NAME	IDDRESS - ZIP	netto Bay, I	FL 33157		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TD PITTS, DOUGLAS W SR. 701 BRICKELL AVE. MIAMI, FL 331312822 VCD REED, NATHANIEL P PO BOX 1213		TITLE NAME STREET A CITY-ST- TITLE NAME STREET A	ADDRESS -ZIP	netto Bay, I	FL 33157		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PITTS, DOUGLAS W SR. 701 BRICKELL AVE. MIAMI, FL 331312822 VCD REED, NATHANIEL P PO BOX 1213 HOBE SOUND, FL 33475	☐ Delete	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST-	ADDRESS -ZIP	netto Bay, I	FL 33157	☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TD PITTS, DOUGLAS W SR. 701 BRICKELL AVE. MIAMI, FL 331312822 VCD REED, NATHANIEL P PO BOX 1213		TITLE NAME STREET A CITY-ST- TITLE NAME STREET A	ADDRESS -ZIP	netto Bay, I	FL 33157		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	TD PITTS, DOUGLAS W SR. 701 BRICKELL AVE. MIAMI, FL 331312822 VCD REED, NATHANIEL P PO BOX 1213 HOBE SOUND, FL 33475 D	☐ Delete	TITLE NAME STREET A CITY-ST- TITLE NAME STREET A CITY-ST-	NDDRESS -ZIP NDDRESS -ZIP	netto Bay, I	FL 33157	☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: __

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/2006

305-251-0007

Daytime Phone #