## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 481516**

City-St-Zip:

PAHOKEE, FL 33476

Entity Name: EVERGLADES FOLIAGE, INC

FILED Jan 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
2088 BACOM PT. RD. P.O. BOX 718 PAHOKEE, FL 33476				2088 BACOM PT. RD. PAHOKEE, FL 33476	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
P.O. BOX	OM PT. RD. 718 E, FL 33476				
FEI Number	: 59-1639920	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
1531 BAC	BARBARA W ON POINT RC E, FL 33476	DAD US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( SHIRLEY, WIL 1531 BACON F PAHOKEE, FL	POINT ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( SHIRLEY, BAF 1531 BACON F PAHOKEE, FL	POINT ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	ST ( SHIRLEY, MAR 1251 BACON R		Title: Name: Address:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: BARBARA SHIRLEY VP 01/30/2009