

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739938

**Entity Name:** EVERGREEN PROPERTY OWNERS ASSOCIATION, INC**Current Principal Place of Business:**3218 SW ISLAND WAY  
PALM CITY, FL 34990**Current Mailing Address:**C/O SIGNATURE PROPERTY MGMT.  
3171 SE DOMINICA TERRACE  
STUART, FL 34997 US**FEI Number:** 59-2369464**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSS, EARLE, BONAN & ENSOR  
789 S. FEDERAL HIGHWAY  
SUITE 101  
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:** DEBORAH ROSS

04/03/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	HOEFER, DEBRA
Address	C/O SIGNATURE PROPERTY MGMT. 3171 SE DOMINICA TERRACE
City-State-Zip:	STUART FL 34997

Title	VP
Name	NELSON, JOHN
Address	C/O SIGNATURE PROPERTY MGMT. 3171 SE DOMINICA TERRACE
City-State-Zip:	STUART FL 34997

Title	SECRETARY
Name	NEUMANN, BRUCE
Address	C/O SIGNATURE PROPERTY MGMT. 3171 SE DOMINICA TERRACE
City-State-Zip:	STUART FL 34997

Title	TREASURER
Name	OWEN, DAWN
Address	C/O SIGNATURE PROPERTY MGMT. 3171 SE DOMINICA TERRACE
City-State-Zip:	STUART FL 34997

Title	DIRECTOR
Name	BARRESI, SALVATORE
Address	C/O SIGNATURE PROPERTY MGMT. 3171 SE DOMINICA TERRACE
City-State-Zip:	STUART FL 34997

*I hereby 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 all other like empowered.*

**SIGNATURE:** DEBRA HOEFER

PRESIDENT

04/03/2023

Electronic Signature of Signing Officer/Director Detail

Date