

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 741733

**FILED**  
**Feb 10, 2017**  
**Secretary of State**  
**CC1507085762**

**Entity Name:** EVERGREEN HOMES VILLAGE HOMEOWNERS ASSOCIATON, INC.

**Current Principal Place of Business:**

12964 SW 133RD COURT  
MIAMI, FL 33186

**Current Mailing Address:**

12964 SW 133RD COURT  
MIAMI, FL 33186 US

**FEI Number:** 59-2350354

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LOPEZ, DANIEL C. ESQ.  
7001 S.W. 87 COURT  
MIAMI, FL 33173 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:** DANIEL C LOPEZ

02/10/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           NOLE, RICARDO  
Address        12964 SW 133RD COURT  
City-State-Zip: MIAMI FL 33186

Title           TREASURER  
Name           PADILLA, ENRIQUE  
Address        12964 SW 133RD COURT  
City-State-Zip: MIAMI FL 33186

Title           SECRETARY  
Name           DE LA PAZ, LOURDES  
Address        12964 SW 133RD COURT  
City-State-Zip: MIAMI FL 33186

Title           VP  
Name           ABBOT, DONALD  
Address        12964 SW 133RD COURT  
City-State-Zip: MIAMI FL 33186

Title           DIRECTOR  
Name           ABBOTT, GLORIA  
Address        12964 SW 133RD COURT  
City-State-Zip: MIAMI FL 33186

Title           ASST. TREASURER  
Name           CASTRO, PIERRE L.  
Address        12964 SW 133RD COURT  
City-State-Zip: MIAMI FL 33186

Title           DIRECTOR  
Name           SANTOS, GREGORIO  
Address        12964 SW 133RD COURT  
City-State-Zip: MIAMI FL 33186

*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:** RICARDO NOLE

P

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date