


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
Jan 12, 2005 08:00 AM
Secretary of State

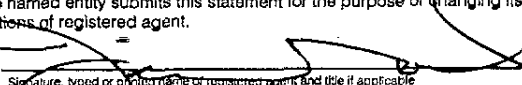
DOCUMENT # A95000000128		
1. Entity Name EVERGREEN INVESTMENTS LIMITED PARTNERSHIP		
Principal Place of Business 13129 N. 19TH ST. TAMPA, FL 33612		Mailing Address 2519 MCMULLEN BOOTH RD., #510-257 CLEARWATER, FL 33761



2. Principal Place of Business		3. Mailing Address		01052005	Chg-LP	CR2E003 (10/03)
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State		4. FEI Number 59-3377383	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
NOEL, JERRY 2519 MCMULLEN BOOTH RD., #510-257 CLEARWATER, FL 33761		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

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  **Jerry Noel** DATE **12/31/04**

9. Capital Contributions as Shown on record. \$160,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P94000088197	STREET ADDRESS	
NAME	EVERGREEN INVESTMENTS, INC.	CITY-ST-ZIP	
STREET ADDRESS	2519 MCMULLEN BOOTH ROAD, SUITE 510-257		
CITY-ST-ZIP	CLEARWATER, FL 33761		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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STREET ADDRESS			
CITY-ST-ZIP			

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 01/12/05-80003-005 535.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:  **Jerry Noel** DATE **12/31/04** (127) 467-9442

STAPLE CHECK HERE