

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002736

FILED
Jan 16, 2012
Secretary of State

Entity Name: EVERGREEN INSURANCE MANAGERS, INC.

Current Principal Place of Business:

5293 NE ELAM YOUNG PKWY STE 160
HILLSBORO, OR 97124

New Principal Place of Business:

Current Mailing Address:

5293 NE ELAM YOUNG PKWY STE 160
HILLSBORO, OR 97124

New Mailing Address:

FEI Number: 20-5870574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: BATES, DYAN
Address: 5293 NE ELAM YOUNG PKWY STE 160
City-St-Zip: HILLSBORO, OR 97124

Title: DVST
Name: SCHULTZ, NANCY
Address: 5293 NE ELAM YOUNG PKWY STE 160
City-St-Zip: HILLSBORO, OR 97124

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

SIGNATURE: NANCY SCHULTZ

DVST

01/16/2012

Electronic Signature of Signing Officer or Director

Date