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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 FEB -6 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K66072 (5)

1. Corporation Name

EVERGREEN RESEARCH AND DEVELOPMENT CORPORATION OF
FLORIDA, INC.

Principal Place of Business

3411 BROADWAY
SUITE 10
FT. MYERS FL 33901
US

Mailing Address

3411 BROADWAY
SUITE 10
FT. MYERS FL 33901
US

600001401546
-02/09/95--01042--017
***208.75 ***208.75

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/16/1989
3a. Date of Last Report 06/07/1994

4. FEI Number 65-0143137
Applied For Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 P.O. Box
Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 4255
Suite, Apt. #, etc.

23 City & State

23 N. Fort Myers, FL.

27 City & State

27 N. Fort Myers, FL.

24 Zip 33901 Country U.S.

29 Zip 33918-4255 Country U.S.

9. Name and Address of Current Registered Agent

KAYUSA, MICHAEL F.
1922 VICTORIA AVE.
FT. MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title of appointment

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME DAVIS, RICHARD R.
STREET ADDRESS 3411 BROADWAY, SUITE 10
CITY - ST - ZIP FT. MYERS FL

TITLE D
NAME DAVIS, KAREN D.
STREET ADDRESS 15125 BRIAR RIDGE CIRCLE
CITY - ST - ZIP FT. MYERS FL

TITLE D
NAME SHORT, DAVID A.
STREET ADDRESS 3481 HIBISCUS DRIVE
CITY - ST - ZIP FT. MYERS FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME Davis, Richard F.
13 STREET ADDRESS P.O. Box 4255
14 CITY - ST - ZIP N. Fort Myers, FL. 33918-4255

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(6), Florida Statutes. I further certify that the information in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the registered agent empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-95

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