2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043498

Entity Name: EVERGREEN TERRACE, LLC

FILED Jan 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2667 FORBES ST 799 ELMWOOD ST

ORANGE PARK, FL 32065 APT#1

JACKSONVILLE, FL 32204

New Mailing Address: Current Mailing Address:

2667 FORBES ST 799 ELMWOOD ST

APT#1 ORANGE PARK, FL 32065 JACKSONVILLE, FL 32204

FEI Number: 20-2772220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JAMES, JOSHUA S JAMES, JOSHUA S 2667 FORBES ST 799 ELMWOOD ST

APT#1 US

ORANGE PARK, FL 32065 JACKSONVILLE, FL 32204 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: JOSHUA S JAMES 01/25/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete (X) Change () Addition

JAMES, JOSHUA S Name: JAMES, JOSHUA S Name: 2667 FORBES ST APT# 1 Address: 799 ELMWOOD ST Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: ORANGE PARK, FL 32065

Title: MGRM () Delete Title: () Change () Addition

CAREY, ANDREW T Name: Name: Address: 13218 GRANT LOGAN LANE Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

CHANEY, CRAIG A Name: Name: 4918 LANE AVENUE SOUTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip:

() Delete Title: MGRM Title: MGRM (X) Change () Addition

Name: SOUTHWELL, JASON J Name: MIMS, KYLE R Address: 11114 ZEPHYR WAY Address: 111 EAST 1ST. APT#44 City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL 32206

Title: MGRM (X) Delete Title: () Change () Addition

MIMS, KYLE R Name: Name: 4831 PLYMOUTH ST Address: Address: City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSHUA S JAMES **MGRM** 01/25/2009