

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109344

FILED  
Apr 11, 2007  
Secretary of State

**Entity Name:** EVERGREEN HOMES OF PALM BEACH, LLC

**Current Principal Place of Business:**

650-4 ROYAL PALM BEACH BLVD.  
ROYAL PALM BEACH, FL 33411 US

**New Principal Place of Business:**

**Current Mailing Address:**

685 ROYAL PALM BEACH BLVD.  
SUITE 105  
ROYAL PALM BEACH, FL 33411 US

**New Mailing Address:**

7138 LAKE WORTH ROAD  
LAKE WORTH, FL 33467 US

**FEI Number:** 20-4281694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARENTE, WENDY  
650-4 ROYAL PALM BEACH BLVD.  
ROYAL PALM BEACH, FL 33411 US

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

EVERGREEN EQUITY, INC.  
7138 LAKE WORTH ROAD  
LAKE WORTH, FL 33467 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: EVERGREEN EQUITY, INC.

04/11/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: OFFR ( ) Delete  
Name: PARENTE, WENDY  
Address: 650-4 ROYAL PALM BEACH BLVD.  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PARENTE, WENDY A  
Address: 650-4 ROYAL PALM BEACH BLVD.  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

I hereby certify that the information supplied with this filing does not qualify for the 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: WENDY A. PARENTE

MGR

04/11/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date