

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L94000000521

1. Entity Name

EVERGREEN MARKETING SERVICES, LLC



Principal Place of Business

1020 EAST LAFAYETTE STREET
SUITE 110
TALLAHASSEE, FL 32302

Mailing Address

P.O. BOX 930
TALLAHASSEE, FL 32302

FILED

07 MAY -1 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04302007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number

59-3281147

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARRETT, DAVID A
1020 E. LAFAYETTE STREET
SUITE 110
TALLAHASSEE, FL 32302

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME BARRETT, DAVID A
STREET ADDRESS 1020 E. LAFAYETTE STREET, SUITE 110
CITY-ST-ZIP TALLAHASSEE, FL 32301

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05/04/07--01052-003 **\$0.00

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1. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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:

David A. Barrett

4/30/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #