

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010757

FILED
Mar 30, 2010
Secretary of State

Entity Name: EVERGLADES COALITION, INC.

Current Principal Place of Business:

450 NORTH PARK ROAD
301
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

450 NORTH PARK ROAD
301
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 35-2242463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADORNATO, JOHN III
5316 NE 5TH AVENUE
OAKLAND PARK, FL 33334 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: D
Name: PERRY, MARK
Address: 890 OCEAN BOULEVARD
City-St-Zip: STUART, FL 34996

Title: D
Name: GROSSO, RICHARD B
Address: 424 FARMINGTON DRIVE
City-St-Zip: PLANTATION, FL 33314

Title: D
Name: HILL-GABRIEL, JULIE
Address: 444 BRICKELL AVENUE, SUITE 850
City-St-Zip: MIAMI, FL 33131

Title: D
Name: LAURA, REYNOLDS
Address: 5530 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33143

Title: D
Name: SHIRREFFS, DAWN
Address: 190 IVES DAIRY ROAD, SUITE 106
City-St-Zip: MIAMI, FL 33179

Title: D
Name: HECKER, JENNIFER
Address: 1450 MERRIHUE DRIVE
City-St-Zip: NAPLES, FL 34102

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

SIGNATURE: DAWN SHIRREFFS

D

03/30/2010

Electronic Signature of Signing Officer or Director

_____ Date