

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010757

FILED
Mar 12, 2012
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: HALE, MALIA
Address: 901 E ST NW, STE 400
City-St-Zip: WASHINGTON, DC 20004

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

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

Title: D
Name: SHIRREFFS, DAWN
Address: 450 N PARK RD STE 301
City-St-Zip: HOLLYWOOD, FL 33021

Title: D
Name: BAUSCH, TOM
Address: P.O. BOX 1923
City-St-Zip: STUART, FL 33495

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

VP

03/12/2012

Electronic Signature of Signing Officer or Director

Date