## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000002109

Entity Name: HEATH EVANS FOUNDATION, INC.

FILED Apr 06, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 183 SANDPIPER AVENUE ROYAL PALM BEACH, FL 33411 **Current Mailing Address: New Mailing Address:** 1128 ROYAL PALM BEACH BOULEVARD ROYAL PALM BEACH, FL 33411 FEI Number: 20-4399531 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FREEMAN, TERRENCE N II 600 NORTHLAKE BLVD NORTH PALM BEACH, FL 33408 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RICHARDSON, JOHN Name: Name: 3836 TIMBERLINE WAY Address: Address: City-St-Zip: BIRMINGHAM, AL 352473 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: THOMAS, KEITH Name: Address: 2871 BRIARFIELD LANE Address: City-St-Zip: MOBILE, AL 36693 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, CHETTE Name: Name: 1622 BRADFORD LANE Address: Address: City-St-Zip: AUBURN, AL 36830 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: EVANS, BETH AN Name: Address: 8077 MAN-O-WAR RD Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: Title: () Delete Title: () Change () Addition EVANS, BRYAN H Name: Name: 8077 MAN-O-WAR RD Address: Address: PALM BEACH GARDENS, FL 33418 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition MARTIN, SUE A MRS. Name: Name: Address: 183 SANDPIPER AVENUE Address: ROYAL PALM BEACH, FL 33411 City-St-Zip: 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 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 an address, with all other like empowered.

SIGNATURE: SUE MARTIN O 04/06/2009