

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 29, 2008**  
**Secretary of State**

DOCUMENT# N07000006545

**Entity Name:** PAUL AND CAROL EVANSON FAMILY FOUNDATION, INC.**Current Principal Place of Business:**355 ALHAMBRA CIRCLE, SUITE 801  
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**355 ALHAMBRA CIRCLE, SUITE 801  
CORAL GABLES, FL 33134**New Mailing Address:****FEI Number:** 26-0891008**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**REGISTERED AGENT CORPORATE SERVICES, INC.  
355 ALHAMBRA CIRCLE, SUITE 801  
CORAL GABLES, FL 33134 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 ( ) Delete  
Name: EVANSON, PAUL J  
Address: 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: EVANSON, CAROL L  
Address: 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: WASHBURN, LISA J  
Address: 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D/P (X) Change ( ) Addition  
Name: EVANSON, PAUL J  
Address: C/O 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

Title: DVPS (X) Change ( ) Addition  
Name: EVANSON, CAROL L  
Address: C/O 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

Title: DT (X) Change ( ) Addition  
Name: WASHBURN, LISA J  
Address: C/O 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134

Title: ASST ( ) Change (X) Addition  
Name: ROSMARIN, MICHAEL  
Address: C/O 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134 FL

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: PAUL EVANSON

P

07/29/2008

Electronic Signature of Signing Officer or Director

Date