

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2008 8:00 am
Secretary of State

03-12-2008 90027 016 ****61.25

DOCUMENT # N36963

1. Entity Name

EVERGREEN VILLAGE HOMEOWNERS ASSN., INC.



Principal Place of Business

ATTN: WILLARD TEED
17100 TAMiami TRAIL, 138
PUNTA GORDA FL 33955
US

Mailing Address

ATTN: WILLARD TEED
17100 TAMiami TRAIL, 138
PUNTA GORDA FL 33955
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0178020

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEE JAY COLLING & ASSOCIATES, P. A.
529 VERSAILLES DRIVE,
SUITE 103
MAITLAND FL 32751

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE TD ☐ Delete
NAME TEED, WILLARD T
STREET ADDRESS 17100 TAMiami TRAIL, 138
CITY- ST- ZIP PUNTA GORDA FL 33955

TITLE PD ☐ Delete
NAME BEAVER, PAUL
STREET ADDRESS 17100 TAMiami TR #173
CITY- ST- ZIP PUNTA GORDA FL 33955

TITLE VPD ☒ Delete
NAME LUND, PAUL
STREET ADDRESS 17100 TAMiami TR. #68
CITY- ST- ZIP PUNTA GORDA FL 33955

TITLE SD ☐ Delete
NAME FIVECOAT, DAVID
STREET ADDRESS 17100 TAMiami TR, # 156
CITY- ST- ZIP PUNTA GORDA FL 33955

TITLE D ☒ Delete
NAME BLAZAK, THOMAS
STREET ADDRESS 17100 TAMiami TR #87
CITY- ST- ZIP PUNTA GORDA FL 33955

TITLE D ☒ Delete
NAME STEPHENS, GLORIA
STREET ADDRESS 17100 TAMiami TR #259
CITY- ST- ZIP PUNTA GORDA FL 33955

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☒ Addition
NAME VPD WHITTAKER, VERN
STREET ADDRESS 17100 TAMiami TR # 271
CITY- ST- ZIP PUNTA GORDA FL 33955

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☒ Addition
NAME LORRAINE DUFOR
STREET ADDRESS 17100 TAMiami TR # 284
CITY- ST- ZIP PUNTA GORDA FL 33955

TITLE ☐ Change ☒ Addition
NAME JOANN BUSSIÈRE
STREET ADDRESS 17100 TAMiami TR # 237
CITY- ST- ZIP PUNTA GORDA FL 33955

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Willard T Teed* TREASURER EVHA

2/29/08

239 567 3145