


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 08:00 A
Secretary of State

DOCUMENT # N38625 1. Entity Name CHRIS EVERT CHARITIES, INC.		
Principal Place of Business % WILSON B. GREATON JR 2601 E OAKLAND PK BLVD #405 FT LAUDERDALE, FL 33306 US		Mailing Address % WILSON B. GREATON JR 2601 E OAKLAND PK BLVD #405 FT LAUDERDALE, FL 33306 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent GREATON, WILSON B. JR 2601 E OAKLAND PK BLVD SUITE 405 FT LAUDERDALE, FL 33306		DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable</small> <small>DATE</small>		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP EVERT, CHRIS 7200 W. CAMINO REAL #310 BOCA RATON, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS EVERT, COLETTE 7200 W. CAMINO REAL #310 BOCA RATON, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT EVERT, JAMES, A. 7200 W. CAMINO REAL #310 BOCA RATON, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV MILL, ANDY 7200 W. CAMINO REAL #310 BOCA RATON, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GREATON, WILSON B. JR 2601 E OAKLAND PARK BLVD., 405 FT LAUDERDALE, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>James A. Evert</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		James A. Evert 3-16-06 954-561-0313 <small>Date Daytime Phone #</small>



02242006 No Chg-NP CR2E037 (11/05)

4. FEI Number 65-0201663	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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04/06/06-80061-025 61.25