

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 19, 2001 8:00 am  
Secretary of State

02-19-2001 90055 048 \*\*\*\*61.25

DOCUMENT # N45093

Entity Name

EVERGREEN YOUTH FOUNDATION, INC.

Principal Place of Business

770 GREENS AVENUE  
WINTER PARK FL 32789  
US

Mailing Address

770 GREENS AVENUE  
WINTER PARK FL 32789  
US

2. Principal Place of Business

23 MALACOMPA

3. Mailing Address

312 W FIRST ST

Suite, Apt. #, etc.

SUITE 612

City & State

PALM COAST FL

City & State

SANFORD FL

Zip

32137

Country

Zip

32771

Country

4. FEI Number

59-3105015

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CONE, DENNIS M  
770 GREENS AVENUE  
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name J. MICHAEL HARTMAN

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

312 W. FIRST ST

SUITE 612

City

SANFORD

FL

Zip Code

32771

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.

SIGNATURE

*J. Michael Hartman*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/13/01

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE VP ☒ Delete

NAME SMITH, PARKER  
STREET ADDRESS 1106 S PALMWAY  
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE PD ☐ Delete

NAME CONE, DENNIS  
STREET ADDRESS 770 GREENS AVENUE  
CITY-ST-ZIP WINTER PARK FL

TITLE SD ☐ Delete

NAME NORRGROVE, JIM  
STREET ADDRESS 770 GREENS AVE  
CITY-ST-ZIP WINTER PARK FL

TITLE T ☐ Delete

NAME HARTMAN, JM  
STREET ADDRESS 312 W 1ST ST, 612  
CITY-ST-ZIP SANFORD FL 32771

TITLE D ☐ Delete

NAME COHEN, MICHAEL DR  
STREET ADDRESS 933 LANCASTER DR  
CITY-ST-ZIP ORLANDO FL 32806

TITLE D ☐ Delete

NAME WILL, CHUCK  
STREET ADDRESS 2720 S. OCEAN BLVD #113  
CITY-ST-ZIP PALM BEACH FL 33480-5464

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE LAURA DRUMM ☐ Change ☒ Addition

NAME 23 MALACOMPA RD  
STREET ADDRESS PALM COAST FL 32137  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*J. Michael Hartman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/15/01

Daytime Phone #

(407) 328-4588

CR2E037 (10/00)