2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 05, 2004 8:00 am Secretary of State DOCUMENT # N99000004275 1. Entity Name 04-05-2004 90405 006 ****70.00 EVERGLADES HAMMOCK, INC. Principal Place of Business Mailing Address 19308 S.W. 380TH STREET POST OFFICE BOX 343529 24035695 FLORIDA CITY FL 33034 HOMESTEAD FL 33034 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 65-0959425 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STEVEN-KILK WELLER, THOMAS Street Address (P.O. Box Number is Not Acceptable) 65 N.W. 16TH STREET HOMESTEAD FL 33030 City Palmetto Bou Zip Code 3315F 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. $\chi_{i}\mathcal{F}$ STEVEN KILL SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change ☐ Addition KIRK, STEVEN NAME NAME 19308 S.W. 380TH STREET STREET ADDRESS STREET ADDRESS FLORIDA CITY FL 33034 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GONZALEZ, DIANA NAME NAME 8235 S.W. 60TH COURT STREET ADDRESS STREET ADDRESS SOUTH MIAMI FL CITY-ST-7IF CITY-ST-ZIP TITLE □.Delete. TITLE Change_ _ Addition JENSEN, ROBERT NAME NAME 18640 S.W. 295TH TERRACE STREET ADDRESS STREET ADDRESS HOMESTEAD FL 33032 CITY-ST-ZIE CITY-ST-ZIP STD TITLE ☐ Delete TITLE ☐ Change ☐ Addition LOPEZ, ARTURO NAME NAME 778 WEST PALM DRIVE STREET ADDRESS STREET ADDRESS HOMESTEAD FL 33034 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PRO, JR, FERNANDO NAME 1 NAME 20310 SW 106TH AVE STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

STEVEN KILL

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED