

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004954

FILED
Jan 16, 2009
Secretary of State

Entity Name: EVERGLADES POLO HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O HAYNE HAMILTON
600 KRYSTAL BUILDING
CHATTANOOGA, TN 37402

New Principal Place of Business:

100 WEST MLK BLVD.
600 KRYSTAL BUILDING
CHATTANOOGA, TN 37402

Current Mailing Address:

C/O HAYNE HAMILTON
600 KRYSTAL BUILDING
CHATTANOOGA, TN 37402

New Mailing Address:

100 WEST MLK BLVD.
600 KRYSTAL BUILDING
CHATTANOOGA, TN 37402

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MEYERS, DAWN M
350 EAST LAS OLAS BLVD., SUITE 1000
FORT LAUDERDALE, FL 33301 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: JOHNSTON, SUMMERIELD K JR.
Address: C/O HAYNE HAMILTON
City-St-Zip: CHATTANOOGA, TN 37402

Title: D () Delete
Name: INGRAM, ORRIN
Address: C/O HAYNE HAMILTON
City-St-Zip: CHATTANOOGA, TN 37402

Title: P () Delete
Name: HAMILTON, HAYNE
Address: 600 KRYSTAL BUILDING
City-St-Zip: CHATTANOOGA, TN 37402

Title: SVP () Delete
Name: CUZZORT, PAMALA
Address: 600 KRYSTAL BUILDING
City-St-Zip: CHATTANOOGA, TN 37402

Title: TVP () Delete
Name: BOONE STRIBLING, GUERRY
Address: 600 KRYSTAL BUILDING
City-St-Zip: CHATTANOOGA, TN 37402

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAMALA K. CUZZORT

SVP

01/16/2009

Electronic Signature of Signing Officer or Director

Date