

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90219 036 \*\*\*150.00

DOCUMENT # P03000044293



1. Entity Name

LC EVERGREEN, INC.

Principal Place of Business

~~8415 RED WAGON LAEN~~  
~~BOCA RATON FL 33433~~

Mailing Address

~~8415 RED WAGON LAEN~~  
~~BOCA RATON FL 33433~~



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

925 SAVANNAH ESTATES DRIVE

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/04)

City & State

City & State

LAKE WORTH, FL

4. FEI Number

61-1447350

Applied For

Not Applicable

Zip

Country

Zip

33467

Country

USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CIANCIOLO, LARRY R

~~8415 RED WAGON LAEN~~  
~~BOCA RATON FL 33433~~

7. Name and Address of New Registered Agent

Name

Maureen E. Cianciolo

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

925 SAVANNAH ESTATES DRIVE

City

LAKE WORTH

FL

Zip Code

33467

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 \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME CIANCIOLO, LARRY R  
STREET ADDRESS ~~8415 RED WAGON LAEN~~  
CITY-ST-ZIP ~~BOCA RATON FL 33433~~

TITLE D ☐ Delete  
NAME CIANCIOLO, MAUREEN E  
STREET ADDRESS ~~8415 RED WAGON LAEN~~  
CITY-ST-ZIP ~~BOCA RATON FL 33433~~

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME 925 Savannah Estates Drive  
STREET ADDRESS Lake Worth, Florida 33467  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME 925 Savannah Estates Drive  
STREET ADDRESS Lake Worth, Florida 33467  
CITY-ST-ZIP

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

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

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

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 607, 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/05 954 448 5051