· 2008 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 18, 2008 08:00 AM DOCUMENT # P04000065105 **Secretary of State EVERGREEN CONSULTING GROUP INC.** Principal Place of Business Mailing Address 2633 WULFERT RD 2633 WULFERT R SANIBEL, FL 33957 SANIBEL, FL 33957 No Chg-P CR2E034 (11/05) 01112008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0983260 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GREEN, LINDA L DO NOT WRITE 2633 WULFERT RD #4 SANIBEL, FL 33957 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 reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE GREEN, RICHARD A NAME 2633 WULFERT RD #4 U00000788638 01/18/08-80052-005 150.00 STREET ADDRESS CITY-ST-ZIP SANIBEL, FL 33957 TS TITLE NAME GREEN, LINDA L 2633 WULFERT RD #4 STREET ADORESS CITY-ST-ZIP SANIBEL, FL 33957 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 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:

STREET ADDRESS CITY+ST-ZIP

RICHATURE AND TYPED OR PRINTED NAME OF RIGHING OFFICER OR D

LIUDA L. GREEN

1-9-08 472-72

FILED