

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mo'ham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040733 (4)

1. Corporation Name

EVERGREEN OF CRYSTAL RIVER, INC.

Principal Place of Business

490 NORTH SUN COAST BLVD.
CRYSTAL RIVER FL 34429

Mailing Address

490 NORTH SUN COAST BLVD.
CRYSTAL RIVER FL 34429



2. Principal Place of Business

21 **EVERGREEN**

Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 **490 Suncoast Bl. US Hwy 19**

City & State

28 City & State

23 **Crystal River**

Zip

Country

29 Zip

Country

24 **34429**

25 **FL**

29

30

9. Name and Address of Current Registered Agent

TSUI, JENNY

490 NORTH SUN COAST BLVD.
CRYSTAL RIVER FL 34429

3. Date Incorporated or Qualified

05/19/1995

3a. Date of Last Report

4. FEI Number

59-3316594

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☒ No ☐

10. Name and Address of New Registered Agent

81 Name

Kuo Holon + JENNY TSUI

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

490 Suncoast Blvd. US Hwy 19

83

Crystal River Fl. 34429

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Kuo Holon + Jenny Tsui

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

(NOTE: Registered Agent signature required when reinstating)

4/29/96

12. OFFICERS AND DIRECTORS

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

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STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PRESIDENT

Kuo Holon

490 Suncoast Bl. US Hwy 19

Crystal River Fl. 34429

SECRETARY

JENNY TSUI

490 Suncoast Bl. US Hwy 19

Crystal River Fl. 34429

600001839926

-05/25/96--01004--003

*****200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jenny Tsui

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 13625632999

Date

Daytime Phone

CR2E034 (12/95)