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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000053469 (8)

1. Corporation Name:

EVERGREEN INVESTMENT GROUP INC.

Principal Place of Business

Mailing Address

129 SCHNEIDER DR
FT MYERS FL 33905

129 SCHNEIDER DR
FT MYERS FL 33905-2711

3. Date Incorporated or Qualified

06/21/1996

3a. Date of Last Report

2. Principal Place of Business Ft. Myers

2a. Mailing Address Ft. Myers

21 336 MORSE PLAZA FIA 33905
Suite, Apt. #, etc.

26 336 MORSE PLAZA FIA 33905
Suite, Apt. #, etc.

22 City & State
23 Ft. Myers Florida

27 City & State
28 Ft. Myers, Florida

24 33905 25 USA

29 33905 30 USA

9. Name and Address of Current Registered Agent

DENHARD, LESTER
129 SCHNEIDER DR
FT MYERS FL 33905

10. Name and Address of New Registered Agent

81 Name

LESTER DENHARD

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

336 MORSE PLAZA

83

84 City

Ft. Myers

FL

85 Zip Code

33905

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

Lester Denhard

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

(NOTE: Registered Agent signature required when reinstating)

1-21-97

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT ☐ DELETE

NAME LESTER DENHARD

STREET ADDRESS 336 MORSE PLAZA

CITY-ST-ZIP FT. MYERS, FLORIDA 33905

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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:

Lester Denhard

LESTER DENHARD

1-21-97

(941) 851-4467

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0396102

CR2E034 (9/96)