SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600058408 (1)

EVERGREEN FINANCIAL SERVICES, INC.

Principal Place of Business Mailing Address 17315 LINDA VISTA CIRCLE 17315 LINDA VISTA CIRCLE **LUTZ FL 33549** LUTZ FL 33549 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 07/11/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 59-3405486 Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 8. This corporation owes or has paid the current year Intangible Zip Country Zip Country 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name KIBBE, RONALD E 17315 LINDA VISTA CIRCLE Street Address (P.O. Box Number is Not Acceptable) 82 **LUTZ FL 33549 B3** City 84 Zip Code 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 Signature, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition NAME KIBBE, RONALD E 1.2 NAME 17315 LINDA VISTA CIRCLE STREET ADDRESS 1.3 STREET ADDRESS LUTZ FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE \_\_ Addition FALCO, ERIC J 2.2 NAME NAME 2359 GLENMOOR RD N 2.3 STREET ADDRESS STREET ADDRESS CLEARWATER FL 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE TITLE DELETE Addition Change NOWERY, KIRK R 3.2 NAME NAME STREET ADDRESS 2750 PELHAM RD N 3.3 STREET ADDRESS ST PETERSBURG FL 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP

14. 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 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.

51 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.2 NAME

5.4 CITY-ST-ZIP 6.1 TITLE

6.3 STREET ADDRESS

DELETE

\_\_ DELETE

ADENICO COURT

3/15/98

(813)878-0093

Change

Addition

Change Addition

FILED

Oct 01 1998 8:00am

Secretary of State

CR2E034 (5/98)