

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095049

Entity Name: EVERGREEN INSURANCE AGENCY, INC.**Current Principal Place of Business:**583 105TH AVENUE NO.
STE. 2
ROYAL PALM BEACH, FL 33411**Current Mailing Address:**583 105TH AVENUE NO.
STE. 2
ROYAL PALM BEACH, FL 33411**FEI Number:** 20-5297323**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCDEAVITT, JENNIFER L
583 105TH AVE NO
SUITE-2
ROYAL PALM BEACH, FL 33411 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	MCDEAVITT, JENNIFER L
Address	583 105TH AVE NO. STE-2
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	TREASURER
Name	MCDEAVITT, DAVID P JR.
Address	583 105TH AVE NO. SUITE-2
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	VP
Name	ORIA, ABEL
Address	583 105TH AVENUE NO. STE. 2
City-State-Zip:	ROYAL PALM BEACH FL 33411

Title	SECRETARY
Name	ZELLER, CHRISTOPHER
Address	583 105TH AVENUE NO. STE. 2
City-State-Zip:	ROYAL PALM BEACH FL 33411

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER L MCDEAVITT**PRESIDENT****04/04/2023**

Electronic Signature of Signing Officer/Director Detail

Date