

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053494

Entity Name: EVERGLADES FUNDING, LLC.**Current Principal Place of Business:**5374 214TH COURT S
BOCA RATON, FL 33486**Current Mailing Address:**5374 214TH COURT S
BOCA RATON, FL 33486 US**FEI Number:** 26-0215497**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JELILIAN, JOHN
5374 214TH COURT S
BOCA RATON, FL 33486 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**Authorized Person(s) Detail :**

Title	MGRM
Name	JELILIAN, JOHN
Address	5374 214TH COURT S
City-State-Zip:	BOCA RATON FL 33486

Title	SEC
Name	JELILIAN, JOHN
Address	5374 214TH COURT S
City-State-Zip:	BOCA RATON FL 33486

Title	DIR
Name	JELILIAN, JOHN
Address	5374 214TH COURT S
City-State-Zip:	BOCA RATON FL 33486

Title	VP
Name	JELILIAN, EILEEN
Address	5374 214TH COURT S
City-State-Zip:	BOCA RATON FL 33486

Title	TREA
Name	JELILIAN, JOHN
Address	5374 214TH COURT S
City-State-Zip:	BOCA RATON FL 33486

Title	DIR
Name	JELILIAN, EILEEN
Address	5374 214TH COURT S
City-State-Zip:	BOCA RATON FL 33486

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN JELILIAN**PRESIDENT****04/28/2014**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date