RI SOS Filing Number: 201435464300 Date: 02/11/2014 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: January 1 - March 1 • **Filing Fee:** $50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.*

1. Corporate ID No.	2. Name of Corporation			
000709947	Evergreen Homes, Inc.			
3. Street Address Principal Business Office		City	State	Zip
1400 Forest Glen Court		Catonsville	MD	21228
4. Business Phone No.	5. State of Incorporation			
410-747-7144	MD			

6. Brief Description of the Character of Business Conducted in Rhode Island
New home construction.

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Street Address	City	State	Zip
Brian G. Macari	1400 Forest Glen Court	Catonsville	MD	21228

Vice President Name	Street Address	City	State	Zip
Brian G. Macari	1400 Forest Glen Court	Catonsville	MD	21228

Secretary Name	Street Address	City	State	Zip
Brian G. Macari	1400 Forest Glen Court	Catonsville	MD	21228

Treasurer Name	Street Address	City	State	Zip
Brian G. Macari	1400 Forest Glen Court	Catonsville	MD	21228

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Street Address	City	State	Zip
Brian G. Macari	1400 Forest Glen Court	Catonsville	MD	21228

Director Name	Street Address	City	State	Zip

Director Name	Street Address	City	State	Zip

9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.

10. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
1,000	STK	1.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

[redacted]

FILED

File Date _____

FEB 11 2014

Check No. _____

BY 11444

By: _____

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature _____ *Date* 1-21-14

Brian G. Macari
Print or Type Name

President
Title

102714-4-942625

Form 630 Rev. 08/08