

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 11 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 # 434730 (8)

1. Corporation Name  
EVANS RANCH CO., INC.

Principal Place of Business  
6005 DEEN STILL RD  
LAKELAND FL 33809

Mailing Address  
6005 DEEN STILL RD  
LAKELAND FL 33809-9780



3. Date Incorporated or Qualified 09/11/1973  
3a. Date of Last Report 06/04/1996

2. Principal Place of Business 21 15407 EVANS RANCH ROAD  
2a. Mailing Address 26 15407 EVANS RANCH ROAD

Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 LAKELAND 27 LAKELAND

City & State City & State  
23 FL 28 FL

Zip Country Zip Country  
24 33809 25 FL 29 33809 30 FL

4. FEI Number 59-1503878  
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
EVANS, WILLIAM E.  
6005 DEEN STILL RD.  
LAKELAND FL 33809

10. Name and Address of New Registered Agent  
81 Name EVANS, William E  
82 Street Address (P.O. Box Number is Not Acceptable) 15407 EVANS RANCH ROAD  
83 LAKELAND  
84 City FL 85 Zip Code 33809

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: William E. Evans Date: 2-20-97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

|                 |                    |                                 |
|-----------------|--------------------|---------------------------------|
| TITLE           | PD                 | <input type="checkbox"/> DELETE |
| NAME            | EVANS, WM E        |                                 |
| STREET ADDRESS  | 6005 DEEN STILL RD |                                 |
| CITY - ST - ZIP | LAKELAND, FL 00000 |                                 |
| TITLE           | D                  | <input type="checkbox"/> DELETE |
| NAME            | EVANS, JULIE P     |                                 |
| STREET ADDRESS  | 6005 DEEN STILL RD |                                 |
| CITY - ST - ZIP | LAKELAND, FL 00000 |                                 |
| TITLE           |                    | <input type="checkbox"/> DELETE |
| NAME            |                    |                                 |
| STREET ADDRESS  |                    |                                 |
| CITY - ST - ZIP |                    |                                 |
| TITLE           |                    | <input type="checkbox"/> DELETE |
| NAME            |                    |                                 |
| STREET ADDRESS  |                    |                                 |
| CITY - ST - ZIP |                    |                                 |
| TITLE           |                    | <input type="checkbox"/> DELETE |
| NAME            |                    |                                 |
| STREET ADDRESS  |                    |                                 |
| CITY - ST - ZIP |                    |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                     |                        |  |
|---------------------|------------------------|--|
| 1.1 TITLE           | PD                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            | WM.E. EVANS            |  |
| 1.3 STREET ADDRESS  | 15407 EVANS RANCH ROAD |  |
| 1.4 CITY - ST - ZIP | LAKELAND FL 33809      |  |
| 2.1 TITLE           |                        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            | JULIE P. EVANS         |  |
| 2.3 STREET ADDRESS  | 15407 EVANS RANCH ROAD |  |
| 2.4 CITY - ST - ZIP | LAKELAND FL 33809      |  |
| 3.1 TITLE           |                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 3.2 NAME            |                        |  |
| 3.3 STREET ADDRESS  |                        |  |
| 3.4 CITY - ST - ZIP |                        |  |
| 4.1 TITLE           |                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 4.2 NAME            |                        |  |
| 4.3 STREET ADDRESS  |                        |  |
| 4.4 CITY - ST - ZIP |                        |  |
| 5.1 TITLE           |                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 5.2 NAME            |                        |  |
| 5.3 STREET ADDRESS  |                        |  |
| 5.4 CITY - ST - ZIP |                        |  |
| 6.1 TITLE           |                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 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: William E. Evans Date: 2-20-97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)