

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 514097

Entity Name: ALOFUS, INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

1500 SAM NUNN BLVD
PO BOX 1012
PERRY, GA 31069

New Principal Place of Business:

1500/1504 SAM NUNN BLVD
PO BOX 1995
PERRY, GA 31069

Current Mailing Address:

P O BOX 1995
PERRY, GA 31069

New Mailing Address:

FEI Number: 58-1317906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELB, MONROE, ESQ.
3400 S.W. THIRD AVENUE
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EVANS, CHARLES
Address: 1500 SAM NUNN BLVD.
City-St-Zip: PERRY, GA 31069

Title: D (X) Delete
Name: EVANS, RONNIE J
Address: 203 JOSHUA ST
City-St-Zip: PERRY, GA 31069

Title: ST () Delete
Name: EVANS, BEVERLY
Address: 1500 SAM NUNN BLVD.
City-St-Zip: PERRY, GA 31069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EVANS, CHARLES J
Address: 1500 SAM NUNN BLVD.
City-St-Zip: PERRY, GA 31069

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: EVANS, BEVERLY J
Address: 1500 SAM NUNN BLVD.
City-St-Zip: PERRY, GA 31069

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHARLES J. EVANS

PD

01/05/2005

Electronic Signature of Signing Officer or Director

_____ Date