

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 613714

Entity Name: EVA-TONE, INC.

FILED
Jan 06, 2005
Secretary of State

Current Principal Place of Business:

4801 ULMERTON ROAD
CLEARWATER, FL 34622

New Principal Place of Business:

Current Mailing Address:

4801 ULMERTON ROAD
CLEARWATER, FL 34622

New Mailing Address:

FEI Number: 59-1901786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EVANS, R.EVAN
4801 ULMERTON ROAD
CLEARWATER, FL 33706 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: CDM () Delete
Name: EVANS, R. EVAN,
Address: 2803 BLUFFS DR
City-St-Zip: LARGO, FL 33770

Title: VDM () Delete
Name: EVANS, LUELLA,
Address: 2803 BLUFFS DR
City-St-Zip: LARGO, FL 33770

Title: SDM () Delete
Name: EVANS, MARK,
Address: 9502 120TH ST N
City-St-Zip: SEMINOLE, FL 33772

Title: PDM () Delete
Name: WELCH, NORMAN,
Address: 2957 SWEETGUM WAY S.
City-St-Zip: CLEARWATER, FL 33761

Title: DM (X) Delete
Name: EVANS, KIM,
Address: 8594 CR 623
City-St-Zip: BUSHNELL, FL

Title: DM () Delete
Name: EVANS, CARL,
Address: 2027 LONG BRANCH LANE
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VDM (X) Change () Addition
Name: BABCOCK, WILLIAM,
Address: 12445 94TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33772

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

Title: PDM (X) Change () Addition
Name: EVANS, CARL,
Address: 2027 LONG BRANCH LANE
City-St-Zip: CLEARWATER, FL 33760

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: CARL EVANS

_____ Electronic Signature of Signing Officer or Director

P

01/06/2005

_____ Date