## 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT			A Mended FILED,
DOCUMENT # G46236			
1. Entity Name EVANS/MICHAEL & ASSOCIATES, INC.			
			04 JUL 29 AM 8: 28
Principal Place of Business Mailing Address			
11197 SOUTH ORANGE BLOSSOM TRAIL 11197 SOUTH ORANGE BL Orlando, Fl 32837 Orlando, Fl 32837		E BLOSSOM TRAIL	SECRETARY OF STATE TALLAHASSEE, FLORIUA
Charles, 12 dead.		ו השתו היו היו היו או או או היו היו היו היו היו היו היו היו היו הי	
2. Principal Place of Business	3. Mailing Address		
Syite, Apt. #, etc.	Suite, Apt. #, etc.		07262004 Chg-P CR2E034 (10/03)
City & State	City & State		4. FEI Number Applied For 59-2306713 Not Applicable
Zip Country	Zip	Country	5 Certificate of Status Desired  \$8.75 Additional
6. Name and Address of Current	Registered Agent	L	7. Name and Address of New Registered Agent
EVANS DEREKS		Name	EAMAN EVONS Jr.
13256 GLACIER NATIONAL DRIVE Street Address			ddress (P.O. Box Number is Not Acceptable)
ORLANDO, FL 32837 3417			17 Gulfstream Road
City ORLA			RLANdo FL 32805
8. The above named entity submits this statement or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 1 107/29/04			
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE			
Amended AR is \$61.25  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees			
10. OFFICERS AND	DIRECTORS Delete	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  SECRETARY  Addition
NAME EVANS, DEREK		NAME	EVONS DEREK
STREET ADDRESS   13256 GLACIER NATIONAL DR   CITY-ST-ZIP   ORLANDO, FL 32837	OVE #5202	STREET ADDRESS City-St-Zip	12036 EROCUS STREET DRLANDO FL 32837
THE ST	Delete	пи `	TBERSURE Addition
NAME EVANS, HERMAN P STREET ADDRESS 13828 TIMBERLAKE DR 202		NAME Street Address	EVANS III. HERMON P.
CITY-ST-ZIP ORLANDO, FL 32824		CITY-ST-ZIP	13828 Timbertake DR. 202 Optondo FL 32824
TITLE VP NAME EVANS, RHONDA	☐ Delete	title Name	☐ Change ☐ Addition
STREET ADDRESS 3417 GULFSTREAM RD CITY-ST-ZIP ORLANDO, FL 32805		STREET ADDRESS City-St-Zpp	
TITLE	Delete -	TITLE _	PRESIDENT Change PAddition.
NAME STREET ADDRESS		NAME STREET ADDRESS	EVANSISM) HERMAN 3417 GUIFSTREAM ROAD ORLANDO FL 32805
CITY-ST-ZIP	<u> </u>	CITY-ST-ZIP	DRLANDO FL 32805
TITLE NAME	☐ Delete	title Name	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS City-St-Zip	400040049544 08/10/0401080004 **61.50
ти	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS	
CITY-ST-ZIP	th this filling days and the	CITY-ST-ZIP	and in Continue 110 OT/ON). Florida Charles 16, the second
12. I hereby certify that the information supplied with this filling does not qualify 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 trug-and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver or trustee/employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, will all other like employered.			
changed, or on an attachment with an address	is true and accurate and that cowered to execute this report, with all other like empowered	rny signature shall t t as required by Cha I.	ave the same legal effect as if made under oath; that I am an officer or director apter 607, Florida Stafutes; and that my name appears in Block 10 or Block 11 if
changed, or on an attachment with an address	is true and accurate and that powered to execute this report will all other like embowered	my signature shall t t as required by Cha	ave the same legal effect as if made under oath; that I am an officer or director apter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if