## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G71752

Entity Name: AM/PM SERVICE GROUP, INC.

FILED Feb 07, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

378 INTERSTATE CT SARASOTA, FL 34240 US

**Current Mailing Address: New Mailing Address:** 

5621 STRAND BLVD. 971 MICHIGAN AVENUE NAPLES, FL 34103 SUITE 211

NAPLES, FL 34110 US

FEI Number: 59-2357038 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

EVANS, JAMES M EVANS, JAMES M 971 MICHIGAN AVENUE 5621 STRAND BLVD. NAPLES, FL 34103 SUITE 211 NAPLES, FL 34110 US

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: 02/07/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition ( ) Delete Title: EVANS, JAMES M Name: Name: EVANS, JAMES M 971 MICHIGAN AVENUE 5621 STRAND BLVD. #211 Address:

Address: NAPLES, FL 34110 City-St-Zip: NAPLES, FL City-St-Zip:

Title: PD Title: PD () Delete (X) Change ( ) Addition EVANS, JAMES C Name: EVANS, JAMES C Name:

971 MICHIGAN AVENUE 5621 STRAND BLVD. #211 Address: Address: NAPLES, FL NAPLES, FL 34110 City-St-Zip: City-St-Zip:

Title: Title: VSD ( ) Delete VSD (X) Change ( ) Addition EVANS, JON C EVANS, JON C Name: Name:

378 INTERSTATE CT 378 INTERSTATE CT Address: Address: City-St-Zip: SARASOTA, FL City-St-Zip: SARASOTA, FL 34240

Title: ( ) Delete Title: (X) Change ( ) Addition

EVANS, VIVIÈNNE C EVANS, VIVIENNE C Name: Name: Address: 971 MICHIGAN AVENUE Address: 5621 STRAND BLVD. #211 City-St-Zip: City-St-Zip: NAPLES, FL NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

VΡ SIGNATURE: JAMES EVANS 02/07/2006