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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90046 003 ***150.00

DOCUMENT # H91485

J.B. EVANS FINANCIAL, INC.

Principal Place of Business Mailing Address				118910119111	,					
2475 ENTERPRISE RD. 2475 ENTERPRISE RD. SUITE 300 SUITE 300 CLEARWATER FL 34623 CLEARWATER FL 34623					DO NOT WRI	TE IN THI	S SPACE			
				1						
2a. Mailing Ac	ddress			4. FEI Number				Applied For		
26				59-2643901				Not Applicable		
Suite, Apt.	Suite, Apt. #, etc.			5. Certifcate of St	atus Desired		\$8.75 Additional Fee Required			
City & Sta	City & State						- \$5.00 May Be Added to Fees			
Zip 29	Co.	untry		,		ent year Ir	ntangible	□No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
		81	Name							
GOTTLIEB & GOTTLIEB, P.A. 2475 ENTERPRISE RD.			Street Addre	dress (P.O. Box Number is Not Acceptable)						
CLEARWATER FL 34623		83			· ·					
-00 CO7 1500 F		84	City			FI	85	Zip Code		
	2475 ENTERPH SUITE 300 CLEARWATER 2a. Mailing Ar 26 Suite, Apt 27 City & Sta 28 Zip 29 ent Registered Ager	2475 ENTERPRISE RD. SUITE 300 CLEARWATER FL 34623 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip County 29 and Registered Agent	2475 ENTERPRISE RD. SUITE 300 CLEARWATER FL 34623 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30 ent Registered Agent 81 82	2475 ENTERPRISE RD. SUITE 300 CLEARWATER FL 34623 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30 ent Registered Agent 81 Name 82 Street Addre 83	Mailing Address 2475 ENTERPRISE RD. SUITE 300 CLEARWATER FL 34623 3. Date Incorpora 12/24/1985 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 City & State 28 Country 29 30 Country 30 Country 30 RThis corporatio Personal Prope ent Registered Agent 81 Name 82 Street Address (P.O. Box Numbe) 83	Mailing Address 2475 ENTERPRISE RD. SUITE 300 CLEARWATER FL 34623 DO NOT WRI 3. Date Incorporated or Qualifed 12/24/1985 4. FEI Number 59-2643901 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 Country 29 Country 29 Country 30 Country 30 Reference Agent 10. Name and Address of New Reference Address (P.O. Box Number is Not Accepta	Mailing Address 2475 ENTERPRISE RD. SUITE 300 CLEARWATER FL 34623 DO NOT WRITE IN THI. 3. Date Incorporated or Qualified 12/24/1985 4. FEI Number 59-2643901 Suite, Apt. #, etc. 27 City & State 28 Country 29 Country 29 Country 29 An This corporation owes the current year In Personal Property Tax. Personal Property Tax. 10. Name and Address of New Registered 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)	2475 ENTERPRISE RD. SUITE 300 CLEARWATER FL 34623 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 12/24/1985 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State City & State 28 Country 29 30 Country 8. This corporation owes the current year Intangible Personal Property Tax. Street Address (P.O. Box Number is Not Acceptable) 83		

 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			· · · · · · · · · · · · · · · · · · ·						
	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
MLE	PD DELETE	1.1 TITLE		Change	☐ Addition				
AME	EVANS, JAMES B.	1.2 NAME	Davis C , Du Noive						
TREET ADDRESS	400 HARBOR DR. NORTH	1.3 STREET ADDRESS	13243 Sanay hage bill						
:Tr: ST-ZIP	INDIAN ROCKS BEACH FL 34635	1.4 CITY-ST-ZIP	3243 Sandy Ridge Drive Clearwater FL 33761						
ITLE	☐ DELETE	2.1 TITLE		Change	☐ Addition				
_		2.2 NAME							
·· I ADDRESS		2.3 STREET ADDRESS							
··· ST-ZIP		2.4 CITY-ST-ZIP							
	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition				
		3.2 NAME							
···· <u>L</u> E / ADDRESS		3.3 STREET ADDRESS							
. ST ZIP		3.4. CITY-ST-ZIP							
	☐ DELETE	4.1 TITLE		Change	Addition				
		4. 2 NAME							
AUDRESS		4.3 STREET ADDRESS							
. ST-ZIP		4.4 CITY-ST-ZIP							
	☐ DELETE	5.1 TITLE		Change	Addition				
_ 1		5.2 NAME							
···· _ I ADDRESS		5.3 STREET ADDRESS	•		ĺ				
ST-ZIP		5.4 CITY-ST-ZIP			•				
7	☐ DELETE	6.1 TITLE		Change	Addition				
_		6.2 NAME							
: AUURESS		6.3 STREET ADDRESS			ì				
ST-ZIP		6.4 CITY-ST-ZIP	<u></u>						

I 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 adcurate 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, with all other like empowered.

---ATURE IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)