

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90088 022 ***150.00

DOCUMENT # J39516

1. Entity Name

EVANS & SON LTD. INC.



Principal Place of Business

EVANS & SON
250 SOUTH BEACH STREET
DAYTONA BEACH FL 32114-4407
US

Mailing Address

EVANS & SON
250 SOUTH BEACH STREET
DAYTONA BEACH FL 32114-4407
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-2775169

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BREWER, ALLAN
250 S. BEACH ST.
DAYTONA FL 32114

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00.

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: **P** ☐ Delete
NAME: **BREWER, ALLAN**
STREET ADDRESS: **250 S BEACH ST**
CITY-ST-ZIP: **DAYTONA BEACH FL**

TITLE: **S** ☒ Delete
NAME: **EVANS, DOUGLAS**
STREET ADDRESS: **1924 SECLUSION DR**
CITY-ST-ZIP: **DAYTONA BEACH FL**

TITLE: **STD** ☒ Delete
NAME: **EVANS, JOHN DOUGLAS**
STREET ADDRESS: **1924 SECLUSION DRIVE**
CITY-ST-ZIP: **DAYTONA BEACH FL**

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: **SECRETARY** ☐ Change ☒ Addition
NAME: **CHRIS EVANS**
STREET ADDRESS: **1924 SECLUSION DR.**
CITY-ST-ZIP: **DAYTONA BEACH, FL 32114**

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
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CITY-ST-ZIP:

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CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/24/06 386-255-5922