FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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141

1. Corporatio	MENI# K56	3 05 (1)		
1	EVANS, INC.				
) (A A COLO A	
Principal Place	a of Rusinase	Mailing Address			
Principal Place of Business 200 HAGEN TERRACE DAYTONA BCH. FL 32114					
		200 HAGEN TERRACE DAYTONA BCH. FL 32114			
				3. Date Incorporated or Qualified	3a. Date of Last Report
				01/06/1989	01/18/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2931299	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	<u> </u>	City & State		6. Election Campaign Financing	Fee Required
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zιρ	Country	Zip	Country	8. This corporation has liability for it	
24	25	29	30	Florida Statutes 💢 Yes	= "
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Ro	egistered Agent
			81 Name	Nendy Evans	
	ns, James		82 Street A	ddress (P.O. Box Number is Not Acceptable	e)
	MBER TRAIL		DO	otlagen Terrac	Q
ORM	OND BEACH FL 32174		83		
			84 City	- Haran Rosal	FL 85 Zip Code 114
11 Pursuant	to the provisions of Sections 6017.0	502 and 607 1609 Florida State	too the chare puried ass	aytora Boach poration submits this statement for the purp	FL 👸 🕉 🐧
or register	red agent, or both, in the State of F	londa. Such change was author	ized by the corporation's b	card of directors. Thereby accept the appo	uose or changing its registered office intrient as registered agent, I am
larmia wi	itir, and accept the obligations of, S	ection boy.coop, Florida Statute	25		
SIGNATURE	Signature it poid or prided name of registered a	Sharel the hactor above a	SOTE Registered Agent supplier regis	Eug ins	-19 - 16
12.	OFFICERS.	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	D	DELETE	1 1 TITLE		Change Addition
NAME	EVANS, JIM	,	1.2 NAME		
STREET ADDRESS	22 TIMBER TRAIL		1.3 STREET ADDRESS		
CrTY - ST - ZIP	ORMOND BEACH FL		1.4 CITY - ST - ZIP	*****	
TITLE	S	☐ DELETE		President + Say	Change Addition
NAME	EVANS, WENDY C		2.2 NAME		
STREET ADDRESS	200 HAGEN TERRACE	A444	2.3 STREEL ADDRESS		
CHTY-ST-ZIP TITLE	DAYTONA BEACH FL 3	Z114 [] DELETE	2.4 CITY - ST - ZIP		F7 0
NAME		L_ Ditter	3 1 1/11.5		☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME		
CITY - ST - ZIP			3.3 STREET ADDRESS 3.4 CITY - ST- ZIP		
TITLE		☐ DELETE	4 1 TILLE		☐ Change ☐ Addition
NAME			4.2 NAME		Onlings Rubition
STREET ADDRESS			4 3 STHEET ADORESS		
CITY - ST - ZIP			4.4 CITY - ST. ZIP		
TITLE		☐ DELETE	5 1 TILE		Change Addition
NAME.		_	5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - S1 - ZIP			5.4 CHTY - ST - ZIP		
TillE		DELETÉ	6 1 TITLE		Change Addition
NAME			6.2 NAME		

C+TY + ST - ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not quality for the exemptors stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this arrive' report or supplemental annual 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 13 if changed, or on an attachment with an address.

6.3 STREET ACORESS

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR FINITED NAME OF SIGNING OFFICER OR DIRECTOR WENTER C. EVOLDS 219 196 904,238.

CR2E034 (12/95)