

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K64862

FILED
Feb 15, 2012
Secretary of State

Entity Name: C. J. EVANS AND ASSOCIATES INC.

Current Principal Place of Business:

% CRAIG J. EVANS
1800 S OCEAN BLVD., #1101
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

% CRAIG J. EVANS
P.O. BOX 301
LIBERTY, MO 64069

New Mailing Address:

FEI Number: 65-0182353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, CRAIG J.
1800 S OCEAN BLVD
STE 1101
POMPANO BCH, FL 33062 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: EVANS, CRAIG J.
Address: 1800 S OCEAN BLVD STE 1101
City-St-Zip: POMPANO BCH, FL 33062

Title: V
Name: EVANS, LIANE S.
Address: 1800 S OCEAN BLVD STE 1101
City-St-Zip: POMPANO BCH, FL 33062

Title: S
Name: EVANS, RENEE L
Address: P.O. BOX 301
City-St-Zip: LIBERTY, MO 64069

Title: S
Name: EVANS, ERIK T
Address: P.O. BOX 301
City-St-Zip: LIBERTY, MO 64069

I hereby 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 all other like empowered.

SIGNATURE: CRAIG J EVANS

D

02/15/2012

Electronic Signature of Signing Officer or Director

_____ Date