


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 28, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000002178			
1. Entity Name EVANS WEB DESIGN, LLC			
Principal Place of Business 1501 S EVERGREEN AVE CLEARWATER, FL 33756 US		Mailing Address 1501 S EVERGREEN AVE CLEARWATER, FL 33756 US	
DO NOT WRITE IN THIS SPACE			
		01042005No Chg-LLC CR2E083 (10/03)	
		4. FEI Number 11-3675260	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent EVANS, AMY K 1501 S. EVERGREEN AVE CLEARWATER, FL 33756		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
Filing Fee is \$50.00 Due by May 1, 2005			
U000000279425 03/28/05-80065-007 50.00			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EVANS, AMY K 1501 S. EVERGREEN AVE CLEARWATER, FL 33756	DO NOT WRITE IN THIS SPACE	
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11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <u>Amy K. Evans</u>		3-25-05 727-47-632	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	