2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 25, 2006 08:00 AM Secretary of State DOCUMENT # P00000062434 1. Entity Name EVANS CROSS MANAGEMENT, INC. Principal Place of Business Mailing Address 979 BEACHLAND BOULEVARD 979 BEACHLAND BOULEVARD VERO BEACH, FL 32963 VERO BEACH, FL 32963 01182006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1072828 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent FENNELL, TODD W DO NOT WRITE 979 BEACHLAND BOULEVARD VERO BEACH, FL 32963 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Foe will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE EVANS, NICHOLAS M. NAME 630 OCEAN ROAD STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32963 U00000400603 02/02/06-80010-018 150.00 TITLE EVANS, CHRISTINE T 630 OCEAN ROAD STREET ADDRESS GITY-SI-ZIP VERO BEACH, FL 32963 BILE FENNELL, TODD W NAME 979 BEACHLAND BOULEVARD STREET ADDRESS DO NOT WRITE CITY-ST-ZIP VERO BEACH, FL 32963 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 it 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.

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NAME STREET ADDRESS CITY-ST-ZIP DILE

STREET ADDRESS CITY-\$1-218

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1-20-06

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