

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00400

1. Entity Name

EVANS REALTY, INC. OF ALABAMA

Principal Place of Business

Mailing Address

729 E. GLEN AVENUE
AUBURN AL 36830

729 E. GLEN AVENUE
AUBURN AL 36830

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 63-0586641

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	EVANS, J.E.	
STREET ADDRESS	626 OGLETREE RD.	
CITY-ST-ZIP	AUBURN AL	
TITLE	STD	<input type="checkbox"/> Delete
NAME	EVANS, PATRICIA J.	
STREET ADDRESS	626 OGLETREE RD.	
CITY-ST-ZIP	AUBURN AL	
TITLE	AV	<input type="checkbox"/> Delete
NAME	DRINKARD, CYDNEY	
STREET ADDRESS	605 ALFA CT	
CITY-ST-ZIP	AUBURN AL	
TITLE	D	<input type="checkbox"/> Delete
NAME	Christie, Laure E.	
STREET ADDRESS	2374 Lime Rock Road	
CITY-ST-ZIP	Birmingham, AL 35216	
TITLE	D	<input type="checkbox"/> Delete
NAME	EVANS, JEFFREY J.	
STREET ADDRESS	444 E. University Drive	
CITY-ST-ZIP	AUBURN AL	
TITLE		<input type="checkbox"/> Delete
NAME	Peterson, Dale E.	
STREET ADDRESS	321 Highway 98 E.	
CITY-ST-ZIP	Destin, FL 32541	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J.E. EVANS *J.E. Evans*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/01

334-821-7098

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

900298

CR2E034 (10/00)

0563985

FILED
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90098 003 ***150.00