

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114682

Entity Name: EVERSHPRED, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

2202 N WESTSHORE BLVD
200-2046
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2202 N WESTSHORE BLVD
200-2046
TAMPA, FL 33607

New Mailing Address:

FEI Number: 14-1852663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIFINO, WILLIAM J
201 N FRANKLIN ST STE 2700
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NORD, CHRISTOPH
Address: 16103 LYTHOM DR
City-St-Zip: ODESSA, FL 33556

Title: V () Delete
Name: DERMAEST, THOMAS
Address: 10429 GREEN LINKS DR
City-St-Zip: TAMPA, FL 33626

Title: V () Delete
Name: NORD, JANELLE
Address: 16103 LYTHAN DR
City-St-Zip: TAMPA, FL 33626

Title: V () Delete
Name: DEMORESH, KERSTEN
Address: 10429 GREEN LINKS DR
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: DEMAREST, THOMAS
Address: 10429 GREEN LINKS DR
City-St-Zip: TAMPA, FL 33626

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: DEMAREST, KIERSTEN
Address: 10429 GREEN LINKS DR
City-St-Zip: TAMPA, FL 33626

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: T. DEMAREST

VP

04/30/2005

Electronic Signature of Signing Officer or Director

Date