## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117155

Entity Name: ELIZABETH EVANS, P.A.

FILED Feb 21, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**Current Principal Place of Business: New Principal Place of Business:** 

3049 CLEVELAND AVE, STE 250 F 35250 SW 177 CT FT MYERS, FL 33901

170

FLORIDA CITY, FL 33034

**Current Mailing Address: New Mailing Address:** 

35250 SW 177 CT P O BOX 275 FT MYERS, FL 33902

FLORIDA CITY, FL 33034

FEI Number: 51-0428199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EVANS, ELIZABETH EVANS, ELIZABETH 3049 CLEVELAND AVE, STE 250 F 35250 SW 177 CT FT MYERS, FL 33901

FLORIDA CITY, FL 33034

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: EEVANS 02/21/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

( ) Delete Title: (X) Change ( ) Addition

Title: EVANS, ELIZABETH EVANS, ELIZABETH Name: Name:

3049 CLEVELAND AVE, STE 250 F 35250 SW 177 CT 170 Address: Address: City-St-Zip: FT MYERS, FL 33901 City-St-Zip: FLORIDA CITY, FL 33034

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 Statutés. 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: EEVANS D,P 02/21/2004