

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073697

FILED
Apr 10, 2009
Secretary of State

Entity Name: BUSINESS EVOLUTION CONSULTING GROUP, INC.

Current Principal Place of Business:

25 ISLAND DRIVE
TREASURE ISLAND, FL 33706

New Principal Place of Business:

Current Mailing Address:

5401 CENTRAL AVE
SAINT PETERSBURG, FL 33710

New Mailing Address:

25 ISLAND DRIVE
TREASURE ISLAND, FL 33706

FEI Number: 20-0086325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, LAURA
BUSINESS EVOLUTION CONSULTING INC
25 ISLAND DRIVE
TREASURE ISLAND, FL 33706 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: WILLIAMS, LAURA
Address: 25 ISLAND DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706

Title: V () Delete
Name: WANGLER, MARGARET M
Address: 25 ISLAND DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARGARET M. WANGLER

VP

04/10/2009

Electronic Signature of Signing Officer or Director

Date