

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 18, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # P04000004634**

1. Entity Name

A. EVETT TRUCKING, INC.



Principal Place of Business

565 JACKSON ROAD  
VENICE, FL 34292 US

Mailing Address

565 JACKSON ROAD  
VENICE, FL 34292 US



03242006 No Chg-P CR2E034 (11/05)

4. FEI Number

86-1092742

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

EDWARD, EVETT  
565 JACKSON ROAD  
VENICE, FL 34292

**DO NOT WRITE  
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)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME EVETT, EDWARD  
STREET ADDRESS 565 N. JACKSON ROAD  
CITY-ST-ZIP VENICE, FL 34292

TITLE ST  
NAME PENDER, LORI  
STREET ADDRESS 565 N JACKSON RD  
CITY-ST-ZIP VENICE, FL 34292

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000516393  
05/01/06-80002-020 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Edward A. Evett Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/06  
Date

(941) 488-8  
Daytime Phone #