

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107391

FILED
Feb 11, 2007
Secretary of State

Entity Name: EVISIONS WEB DESIGN, INC.

Current Principal Place of Business:

2429 STONEY GLEN DR
ORANGE PARK, FL 32003

New Principal Place of Business:

2429 STONEY GLEN DR
ORANGE PARK, FL 32003 US

Current Mailing Address:

2429 STONEY GLEN DR
ORANGE PARK, FL 32003

New Mailing Address:

2429 STONEY GLEN DR
ORANGE PARK, FL 32003 US

FEI Number: 51-0596201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEVY, SUSAN T
2429 STONEY GLEN DR
ORANGE PARK, FL 32003 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: D () Delete
Name: ALEVY, SUSAN T
Address: 2429 STONEY GLEN DR
City-St-Zip: ORANGE PARK, FL 32003

Title: D () Delete
Name: BRAATZ, JOAN C
Address: 3671 WINGED FOOT CIR
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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 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: SUSAN T. ALEVY

D

02/11/2007

Electronic Signature of Signing Officer or Director

Date