2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000147328

Entity Name: ZEVO INC.

FILED Jan 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 581 BLACK LION DR NE SAINT PETERSBURG, FL 33716 **Current Mailing Address: New Mailing Address:** 581 BLACK LION DR NE SAINT PETERSBURG, FL 33716 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZURBRICK, DONALD E BUCKLES, WILLIAM G III 581 BLACK LION DR NE 8540 29TH WAY 102 SAINT PETERSBURG, FL 33716 US PINELLAS PARK, FL 33782 US 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: WILLIAM BUCKLES 01/27/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: MGR (X) Change () Addition ZURBRICK, DONALD E ZURBRICK, DONALD E Name: Name: 581 BLACK LION DR NE 581 BLACK LION DR NE Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33716 US City-St-Zip: SAINT PETERSBURG, FL 33716 US () Delete Title: () Change (X) Addition Title: Name: Name: BUCKLES, WILLIAM G III 8540 29TH WAY APT 102 Address: Address: PINELLAS PARK, FL 22782 US City-St-Zip: City-St-Zip: Title: () Change (X) Addition Title: () Delete MGR FAULHABER, CHRISTAPHER Name: Name: 961 KNOLLWOOD DR. Address Address: City-St-Zip: City-St-Zip: DUNEDIN, FL 34698 US Title: () Delete Title: MGR () Change (X) Addition STRAIGHT, MACKENZIE Name: Name: Address: Address: 5817 DALE CREEK LANE City-St-Zip: City-St-Zip: RIVERVIEW, FL 33569 US Title: Title: () Change (X) Addition MGR () Delete JOHNN, RICHARD Name: Name: Address: Address: 2735 ST. CLOUD OAK DRIVE City-St-Zip: City-St-Zip: VALRICO, FL 33594 US

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: WILLIAM BUCKLES MGR 01/27/2008