

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079239

FILED
Apr 08, 2009
Secretary of State

Entity Name: EVOLUTION GAME TABLES, INC.

Current Principal Place of Business:

2754 LOGANSIDE DRIVE
ORLANDO, FL 32817

New Principal Place of Business:

2754 LOGANDALE DR
ORLANDO, FL 32817

Current Mailing Address:

2754 LOGANSIDE DRIVE
ORLANDO, FL 32817

New Mailing Address:

2754 LOGANDALE DR
ORLANDO, FL 32817

FEI Number: 22-3966297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PD () Delete
Name: STAFFORD, EUGENE
Address: 2754 LOGANSIDE DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: VD () Delete
Name: STAFFORD, BRIAN
Address: 2754 LOGANSIDE DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: STD () Delete
Name: STAFFORD, DARLENE
Address: 2754 LOGANSIDE DRIVE
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STAFFORD, EUGENE
Address: 2754 LOGANDALE DR
City-St-Zip: ORLANDO, FL 32817

Title: VD (X) Change () Addition
Name: STAFFORD, BRIAN
Address: 2754 LOGANDALE DR
City-St-Zip: ORLANDO, FL 32817

Title: STD (X) Change () Addition
Name: STAFFORD, DARLENE
Address: 2754 LOGANDALE DR
City-St-Zip: ORLANDO, FL 32817

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: EUGENE STAFFORD

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date