

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000045426

Entity Name: EVANS NURSERY, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

6460 MAGEE ST
SPRING HILL, FL 34613 US

New Principal Place of Business:

Current Mailing Address:

6460 MAGEE ST
SPRING HILL, FL 34613 US

New Mailing Address:

FEI Number: 59-3256508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERMINO, MICHAEL
927 EAST KLOSTERMAN ROAD
TARPOON SPRINGS, FL 34689 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: DPVS () Delete
Name: EVANS, JAMES R
Address: 4317 CALIENTA ST.
City-St-Zip: SPRING HILL, FL 34607

Title: T () Delete
Name: EVANS, JAMES R
Address: 4317 CALIENTA ST.
City-St-Zip: SPRING HILL, FL 34607

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 Section 119.07(3)(i), 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: JAMES EVANS

DPVS

04/29/2005

Electronic Signature of Signing Officer or Director

Date