2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000006051

1. Entity Name
EAVIS ENTERPRISES, INC.

Principal Place of Business	Mailing Address
6112 33RD ST., E UNIT 101 BRADENTON, FL 34203	6112 33RD ST., E UNIT 101 BRADENTON, FL 34203

DO NOT WRITE IN THIS SPACE

07062004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0640155	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

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6. Name and Address of Current Registered Agent

EAVIS, DALE SCOTT
6112 33RD ST E
UNIT 101
BRADENTON, FL 34203

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 $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

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U000000170389
08/19/04-60001-017  550.00
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10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	EAVIS, DALE SCOTT
STREET ADDRESS	6112 33RD STREET E
CITY-ST-ZIP	BRADENTON, FL 34203

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Dale Scott Eavis_   7-5-04   (941)727-6828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #