### FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

#### 1999 DOCUMENT # P96000067980

## **EVANS DEVELOPMENT COMPANY**

Principal Flace of Business

Mailing Address

# FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90159 015 \*\*\*150.00



<b></b>	J	3			- 1			
1236 GEORGE BUSH BLVD DELRAY BEACH FL 33483	P.O. BOX 812218 BOCA RATON FL 334	P.O. BOX 812218 BOCA RATON FL 33481			DO NOT WRITE IN THIS SPACE			
					1	Date Incorporated or Qualifed 08/15/1996		
2. Principal Place of Business	2a. Mailing Address				4.	FEI Number		Applied For
	26					65-0697112	Γ	No: Applicable
Suite, /.pt. #, etc.	Suite, Apt. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	City & State				6	ection Campaign Financing	\$5.00 May Be	
23	28	28			Trust Fund Contribution		Added to Fees	
<del></del>	Country Zip Co		ntry  8. This corporation owes the current yea Personal Property Tax.		Intangible			
9. Name and Address of Current Registered Agent				10. Name and Address of New Register ed Agent				
FOX, RICHARD C			81	Name				
3401 LAKEVIEW DR			82	Street A 1dr	ress (P	P.O. Bok Number is Not Acceptable)		
DELRAY BEACH FL 33445			83					
			84	City		F	L 85	Zip Code
11. Pursuant to the provisions of S	ections 607.050 2 and 607.1508, Florida S	Statutes, the a	bove	-named corp	oration	subm ts this statement for the purpose	of changi	ing its registered

office or registered agent, or both, in the State of Fonda. Such change wauthorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Forida Statutes.

SIGNATURE Signature, typed or printed n ime of registered ager t and title if applicable (NO E Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition ☐ DELETE 1.1 TITLE ☐ Change TITLE 1.2 NAME NAME EVANS, MARY E 1236 GEORGE BUSH BLVD STREET ADDRESS 1.3 STREET ADDRESS **DELRAY BEACH FL 33483** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change ☐ Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I heretry certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.0"(3)(i), Florida Statutes. I further pertify that the information indicated on this annual report or supplemental annual 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 the my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)