

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000054196

Entity Name: OLMEC, INC.

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

5502 NW 43RD ST
STE 2
GAINESVILLE, FL 32653 US

New Principal Place of Business:

Current Mailing Address:

5502 NW 43RD ST
STE 2
GAINESVILLE, FL 32653 US

New Mailing Address:

FEI Number: 59-3468996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, GEOFFREY S
5502 NW 43RD ST STE 2
GAINESVILLE, FL 32653 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: VP () Delete
Name: EVANS, GARY S
Address: 2516 N.W. 43RD STREET
City-St-Zip: GAINESVILLE, FL 32606

Title: P () Delete
Name: EVANS, GEOFFREY S
Address: 2516 N.W. 43RD STREET
City-St-Zip: GAINESVILLE, FL 32606

Title: VP () Delete
Name: EVANS, GARY G
Address: 2516 N.W. 43RD STREET
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: EVANS, GARY S
Address: 5202 NW 43RD STREET SUITE 2
City-St-Zip: GAINESVILLE, FL 32653

Title: P (X) Change () Addition
Name: EVANS, GEOFFREY S
Address: 5502 N.W. 43RD STREET SUITE 2
City-St-Zip: GAINESVILLE, FL 32653

Title: VP (X) Change () Addition
Name: EVANS, GARY G
Address: 5202 NW 43RD STREET SUITE 2
City-St-Zip: GAINESVILLE, FL 32653

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: GEOFFREY S. EVANS

PRES

03/16/2009

Electronic Signature of Signing Officer or Director

_____ Date