## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000103105

Entity Name: BEVAN & CO. INC

City-St-Zip:

FT MYERS, FL 33919

FILED Jun 29, 2005 Secretary of State

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Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
6309 CORPORATE COURT			1200 MASANABO LANE		
#103 FORT MYERS, FL 33919 US			FORT MYERS, FL 3391	9 US	
FURTIVITI	ERS, FL 339	9 US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
PO BOX 60777 FORT MEYERS, FL 33906			PO BOX 60777 FORT MEYERS, FL 339	906 US	
FEI Number:	: 65-0800526	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	l Address of	Current Registered Agent:	Name and Address of I	New Registered Agent:	
BEVAN, JANE 6309 CORPORATE COURT			BEVAN, JANE 1200 MASANABO LANE		
#103 FT MYERS, FL 33919 US			FORT MYERS, FL 3391	9 US	
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:				06/29/2005	
	Electro	nic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did n	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title:	D (	) Delete	Title: (	) Change ( ) Addition	
Name:	BEVAN, ANDR		Name:	, enange ( ): laamen	
Address:	1200 MASANA		Address:		
City-St-Zip:	FT MYERS, F	_ 33919	City-St-Zip:		
Title:	D (	) Delete	Title: (	) Change ()Addition	
Name:	BEVAN, BRIAN	1	Name:		
Address:	1200 MASANA		Address:		
City-St-Zip:	FT MYERS, F	_ 33919	City-St-Zip:		
Title:	D (	) Delete	Title: (	) Change ()Addition	
Name:	ress: 1200 MASANABO LANE		Name:		
Address:			Address:		
City-St-Zip:	FT MYERS, F	_ 33919	City-St-Zip:		
Title:	D (	) Delete	Title: (	) Change ( ) Addition	
Name:	BEVAN, LISA		Name:		
Address:	1200 MASANA	BO LANE	Address:		

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.

City-St-Zip:

SIGNATURE: ANDREW BEVAN D 06/29/2005