

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000026924

**Entity Name:** EVANS AUTOMOTIVE AND TIRE CENTER INC

**Current Principal Place of Business:**

1585 PINECREST STREET  
ST AUGUSTINE, FL 32084

**Current Mailing Address:**

1585 PINECREST STREET  
ST AUGUSTINE, FL 32084

**FEI Number:** 20-4368500

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

EVANS, JOSEPH M  
440 KELLER LANE  
ST AUGUSTINE, FL 32086 US

*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

**Officer/Director Detail :**

Title            PRES  
Name            EVANS, JOSEPH M  
Address        440 KELLER LANE  
City-State-Zip: ST AUGUSTINE FL 32086

Title            VPRE  
Name            EVANS, STEPHANIE K  
Address        440 KELLER LANE  
City-State-Zip: ST AUGUSTINE FL 32086

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOSEPH MARK EVANS

**PRESIDENT**

**03/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date