

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J99713 (6)**

1. Corporation Name
BOWEN REALTY, INC.



Principal Place of Business: **12794 FOREST HILL BOULEVARD, #10-A WEST PALM BEACH FL 33414**
Mailing Address: **12794 FOREST HILL BOULEVARD, #10-A WEST PALM BEACH FL 33414**

3. Date Incorporated or Qualified: **10/30/1987**
3a. Date of Last Report: **02/03/1995**
4. FEI Number: **65-0014945**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
**WITKOWSKI, RONALD
12788 FOREST HILL BLVD., #1002
WEST PALM BEACH 33414**

10. Name and Address of New Registered Agent
81 Name: **RONALD WITKOWSKI, ESQ.**
82 Street Address (P.O. Box Number is Not Acceptable): **5850 T.G. LOB BLVD.**
83: **STE. 535**
84 City: **ORLANDO** FL 85 Zip Code: **32822**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized 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, Florida Statutes.

SIGNATURE: *[Signature]* **RONALD WITKOWSKI, ESQ.** 1/22/96
DATE: 1/22/96

12. OFFICERS AND DIRECTORS
1. TITLE: **PST** DELETE
2. NAME: **BOWEN, DARELL**
3. STREET ADDRESS: **12794 FOREST HILL BLVD**
4. CITY-STATE-ZIP: **WEST PALM BEACH FL**
5. TITLE: DELETE
6. NAME:
7. STREET ADDRESS:
8. CITY-STATE-ZIP:
9. TITLE: DELETE
10. NAME:
11. STREET ADDRESS:
12. CITY-STATE-ZIP:
13. TITLE: DELETE
14. NAME:
15. STREET ADDRESS:
16. CITY-STATE-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE: Change Addition
2. NAME:
3. STREET ADDRESS:
4. CITY-STATE-ZIP:
5. TITLE: Change Addition
6. NAME:
7. STREET ADDRESS:
8. CITY-STATE-ZIP:
9. TITLE: Change Addition
10. NAME:
11. STREET ADDRESS:
12. CITY-STATE-ZIP:
13. TITLE: Change Addition
14. NAME:
15. STREET ADDRESS:
16. CITY-STATE-ZIP:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify 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 that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **DARELL BOWEN, PRES.** 1/22/96 407-798-2429
DATE: 1/22/96 DAYTIME PHONE: 407-798-2429

CR2E034 (12/95)