

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90577 025 ****55.00

DOCUMENT # L00000009592

1. Entity Name

STOWELL PROPERTIES, LLC

DO NOT WRITE IN THIS SPACE

957276

2. Principal Place of Business

2873 THORNTON ROAD

3. Mailing Address

2873 THORNTON ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CLEARWATER, FLORIDA

City & State

CLEARWATER, FLORIDA

Zip

33759

Country

U.S.A.

Zip

33759

Country

U.S.A.

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

ALLAN J. STOWELL

Street Address (P.O. Box Number is Not Acceptable)

2873 THORNTON ROAD

City

CLEARWATER

FL

Zip Code

33759

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR**
NAME **ALLAN J. STOWELL**
STREET ADDRESS **2873 THORNTON ROAD**
CITY-ST-ZIP **CLEARWATER, FLORIDA 33759**

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CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

APR 14 30, 2002 727-799-3500