

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F33462

**Entity Name:** ROBERT LOWELL, CPA, P.A.

**Current Principal Place of Business:**

3000 N UNIVERSITY DR  
SUITE E  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

BOX 77-0430  
CORAL SPRINGS, FL 33077-0430 US

**FEI Number:** 59-2082015

**Certificate of Status Desired:** No

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

LOWELL, ROBERT  
3000 N UNIVERSITY DR  
SUITE E  
CORAL SPRINGS, FL 33065 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 DP  
Name LOWELL, ROBERT  
Address 3000 N UNIVERSITY DR SUITE E  
City-State-Zip: CORAL SPRINGS FL 33065

*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:** ROBERT LOWELL

**PRESIDENT**

**04/17/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date