

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90017 044 \*\*\*150.00

**DOCUMENT # 150790**

1. Entity Name

**DOWLING HOTELS, INC.**

Principal Place of Business

**11800 GULF BLVD  
TREASURE ISLAND FL 33706**

Mailing Address

**11800 GULF BLVD  
TREASURE ISLAND FL 33706**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DOWLING, HERBERT L  
11800 GULF BLVD  
TREASURE ISLAND FL 33706**

Name

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

City

**FL**

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD DOWLING, HERBERT L 11801 FIRST STREET E. TREASURE ISLAND FL	<input type="checkbox"/>		
VD DOWLING, RICHARD L 2710 PIEDMONT AVE. #5 MONTROSE CA	<input type="checkbox"/>		
SD DOWLING, JAMES A. 6835-4TH AVE. N. ST PETERSBURG FL	<input type="checkbox"/>		
	<input type="checkbox"/>	officer/ Director Robert W. Dowling 11260-7th St. East Treasure Island, FL 33706	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/>	officer/ Director Mary L. Dowling 119-108th Ave. #156 Treasure Island, FL 33706	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary L. Dowling*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-01

Date

727-367-1969

Daytime Phone #

CR2E034 (10/00)