

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 181368

Entity Name: BOWEN BROTHERS, INC.

FILED
Apr 08, 2008
Secretary of State

Current Principal Place of Business:

1050 SNIVELY AVE
WINTER HAVEN, FL 33880 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1819
WINTER HAVEN, FL 338821819 US

New Mailing Address:

FEI Number: 59-0741718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOWEN, GILBERT
2500 FIRETOWER ROAD
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOWEN, GILBERT,
Address: 2500 FIRETOWER ROAD
City-St-Zip: HAINES CITY, FL

Title: VP () Delete
Name: BOWEN, MARSHA L
Address: 11300 HATCHINEHA RD.
City-St-Zip: HAINES CITY, FL

Title: VP () Delete
Name: BOWEN, GERALD K
Address: PO BOX 120
City-St-Zip: ELLENTON, FL 34222

Title: VPST () Delete
Name: TUCKER, REGINA A
Address: 924 15TH STREET NE
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOWEN, GILBERT,
Address: 2500 FIRETOWER ROAD
City-St-Zip: HAINES CITY, FL 33844

Title: VPST (X) Change () Addition
Name: TUCKER, REGINA A
Address: 924 15TH ST NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: D (X) Change () Addition
Name: BOWEN, GERALD K
Address: PO BOX 120
City-St-Zip: ELLENTON, FL 34222

Title: D (X) Change () Addition
Name: BOWEN, MARSHA L
Address: 9896 HATCHINEHA RD
City-St-Zip: HAINES CITY, FL 33844

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GILBERT BOWEN

P

04/08/2008

Electronic Signature of Signing Officer or Director

Date