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

PROFIT CORPORATION ANNUAL REPORT



Ft ORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

SIGNATURE:

218830

(8)

1.	Corporation Name
	ROWE-MITCHELL, INC.

r - Filmoipal Place	of Business	Mailing Address				ABUN BUBUN BUBUN BUBUN BUBUN BHRUN BIRKA
3920 MURDOCK AVE SARASOTA FL 34231		3920 MURDOCK AVE SARASOTA FL 34231				
					3. Date Incorporated or Qualified 01/03/1959	3a. Date of Last Report 04/04/1995
2. Principal Pla [21]		2a. Mailing Address 26			4. FEI Number 59-0863995	Applied For Not Applicable
Suite, Apt. #	, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
Orty & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z(j)	Country 25	Ζ'iρ 29	Country 30	í	8. This corporation has liability for in	
<u>.</u>	9. Name and Address of Curre				10. Name and Address of New R	
			81	Name		
	L, THOMAS E.		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)
	JRDOCK AVE TA FL 34231		83			
0. # 2 ,0 0			84	City		B5 Zip Code
			1		oration submits this statement for the pur	
familiar witt SIGNATURE :	d agent, or holti, in the State of Fid i, and accept the obligations of, Se spint he speak or protot name of repolationary	ction 607.0505, Florida Statutes	3.		and of directors. I hereby accept the appoint	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	ICERS AND DIRECTORS IN 12
TRUE	PD HITCHELL THOMAS E	DELETE	1 TITLE			☐ Change ☐ Addition
NAME	MITCHELL, THOMAS E 4645 MCINTOSH RD		12 NAME			
STREET ADDRESS CITY STAZIF	SARASOTA, FL 00000		14 CITY-	T ADDRESS		
li'th	VS	DELETE	2 1 TIFLE	31-21		☐ Change ☐ Addition
NAME	MITCHELL, ROBERT T.		2.2 NAME			
STREET ADDRESS	2230 SANDRALA DRIVE		23 STREE	T ADDRESS		
CITY+S1+7IP	SARASOTA FL	DELFIE	24 C-1Y-	ST-ZIP		
TITLE NAME			3 1 TITLE 3 2 NAME			Change : Addition
STREET ADDRESS				T ADDRESS		
CHY SUZP			3.4 CiTY -	ST-ZIP		
TILF		☐ DELFIE	4 1 TITLE			☐ Change ☐ Addition
NAME			4.2 NAME			
STREET ADDRESS				T ADDRESS		
OFY ST Zer THE		["] DELETE	4.4 C/TY - 5.1 TITLE	ST - ZIP		Change Addition
NAME		<u></u>	5.2 NAME			
STREET ADDRESS				I ADDRESS		
CHY ST ZP			5.4 CHY-	S1 - 21P		
THUE		☐ DELETE	& 1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS				I ADDRESS		
(dir. \$1-7at 14. Ldo herebo	contifue that the information is motified	with this filipp is valuntarily for	64 D/TY - 3		for the exemption stated in Section 119.	07/Qubb Florida Ctationa 15 dhe
certify that oath; that f	the information indicated on this an am an officer or director of the con	r war this lining is volcitizally fift hual report or supplemental arm poration or the receiver or trust r on an attachment with an aud	nual report is tr enipowered	and liccui o ex lute ti	rate and that my signature shall have the his report as required by Chapter 607, Flo	same legal effect as if made under orida Statutes; and that my name

941-921-4696