

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 501513
1. Corporation Name
LOW-SD, INC.

Principal Place of Business: _____
Mailing Address: _____

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
21 118 South Ring Rd.		26 P.O. Box # 618233		April 1976		591664838		Not Applicable	
22 Suite, Apt #, etc		27 Suite, Apt #, etc		5. Certificate of Status Desired		58.75 Additional Fee Required			
23 Orlando FL		28 Orlando FL		6. Election Campaign Financing Trust Fund Contribution		55.00 May Be Added to Fees			
24 32811 USA		29 32811 USA		30 32811 USA		30 32811 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
								Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
William S. Stillwell 1071 Alameda Drive Longwood, FL. 32750				81 Name			
				82 Street Address (P.O. Box Numbers Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: William S. Stillwell William S. Stillwell 6/10/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	11 TITLE	William S. Stillwell
NAME	William S. Stillwell	12 NAME	1071 Alameda Drive
STREET ADDRESS	P.O. Box # 618233	13 STREET ADDRESS	Longwood, FL. 32750
CITY-ST-ZIP	Orlando, FL 32811	14 CITY-ST-ZIP	
TITLE		21 TITLE	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an oral agreement with an address.

SIGNATURE: William S. Stillwell William S. Stillwell 6/10/98 407-299-5002

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: President

CR2E034 (10/97)