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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 613271**

FRED BOWMAN REALTY, INC.

## **FILED** Feb 09, 1999 8:00am Secretary of State 02-09-1999 90015 020 \*\*\*150.00



Principal Plac	ce of Business	Mailing Address							
1 '		592 S. FERDON BLVD.						-	
592 S. FERDON BLVD. 592 S. FERDON PO BOX 1313									
CRESTVIEW FL 32536. CRESTVIEW FL 32536					DO NOT WRITE IN THIS SPACE				
1						3. Date incorporated or Qualifed			
						03/21/1979			
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	I A	pplied For	0
21	÷	26				59-1908087	<u> </u>	ot Applicable	100
Suite, Apt.	#, etc	Suite, Apt. #, etc.	•			<del></del>	<del></del>	Additional	ئىتى.
22		27				5. Certificate of Status Desired		equired	
City & Stat	te	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		to Fees	
Zip	Country	Zip	Cor	untry		8: This corporation owes the current y			
24	25	29	30	•		Personal Property Tax.	☐ Yes	□No	
2-41	9. Name and Address of Cui			Τ		10. Name and Address of New Regis	tered Agent		
				81	Name				
CAN	APBELL, FERRIN C SR			$\sqcup$					
341	HWY 90 WEST			82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
P.O.	. BOX 846			83		- 1777年 1 1589年 2月1日 - 1777年 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A St. Settle St. 1 Bright	5161: B(BH 1261	
CRE	STVIEW FL					<b>"我们就是我们的</b>	國語語	獨相談	
				84	City		85 Zip	Code	
•									
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11. Pursuant	registered agent, or both, in the St	tate of Florida. Such change wa	s authorize	d by th	named corporation	oration submits this statement for the purp on's board of directors. I hereby accept the	ose of changing its appointment as re	registered egistered	
11. Pursuant	t to the provisions of Sections 607 registered agent, or both, in the St am familiar with, and accept the ob	tate of Florida. Such change wa	s authorize	d by th	named corporation	oration submits this statement for the purp on's board of directors. I hereby accept the	ose of changing its appointment as re	s registered egistered	
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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 attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

□ DELETE