

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90112 043 ***150.00

DOCUMENT # 643221

1. Entity Name

D. F. BOWERS & COMPANY

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15 Paradise Plaza

Suite, Apt. #, etc.

3. Mailing Address

1604 Cooksey Trail

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

No. 181

City & State

Sarasota, FL

Zip

34239

Country

US

City & State

Grayling, MI

Zip

49738

Country

US

4. FEI Number

59-1961900

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

LOPEZ, E. John

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

1819 Main St., Ste 610

City

Sarasota

FL

Zip Code

34236

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BOWERS, Donald F. 1604 Cooksey Trail Grayling, MI 49738	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE

DONALD F. BOWERS, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/19/02
989-348-7966

CR2E034B (12/01)