2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G55344

7258 MYRTLE RD. S.E.

FT. MYERS, FL

Address:

City-St-Zip:

Entity Name: BOWMAN'S LANDCLEARING AND FILL, INC.

FILED May 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7258 MYRTLE RD., S.E. 7258 MYRTLE RD., S.E. FT. MYERS, FL 33912 FT. MYERS, FL 33967 **Current Mailing Address: New Mailing Address:** 7258 MYRTLE RD., S.E. FT. MYERS, FL 33912 FEI Number: 59-2354946 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOWMAN, JOE H. 7258 MYRTLE RD.,S.E. FT. MYERS, FL 33912 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BOWMAN, JOE H., Name: Name: 7258 MYRTLE RD. S.E. Address: Address: City-St-Zip: FT. MYERS, FL City-St-Zip: Title: VST Title: () Change () Addition () Delete Name: BOWMAN, DARCY DRU, Name:

Address:

City-St-Zip:

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: DARCY DRU BOWMAN VST 05/18/2007