2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 02, 2007 8:00 am Secretary of State DOCUMENT # H73767 1. Entity Name 04-02-2007 90054 007 ***150.00 DOW SHERWOOD CORPORATION Principal Place of Business Mailing Address 6304 BENJAMIN ROAD 6304 BENJAMIN ROAD SUITE 503 TAMPA FL 33634 US SUITE 503 TAMPA FL 33634 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 59-2576935 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WOLFE, RANDY Street Address (P.O. Box Number is Not Acceptable) 100 NORHT TAMPA STREET **SUITE 2700 TAMPA FL 33602** City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. President Walker, Paul 5404 Hoover Blvd. #23 ☐ Change TITLE Delete TILLE Addition TONELLI, MICHAEL NAME NAME 201 E KENNEDY, SUITE 1700 STREET ADDRESS STREET ADDRESS **TAMPA FL 33602** CITY-ST-ZIP CHY+ST-ZIP Tampa, FL 33634 Change HILE Delete ■ Addition TITZE, MIKE NAME 1906-A BUFORD BVLD. STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32308-4443 CITY-ST-7IP CITY ST-7IP THE ☐ Delete HIII Roberts, C. Kirt 1420 N. Atlantic Ave #1001 Dayton Beach, FL 32118 NAME ROBERTS, C KIRT NAME 6304 BENJAMIN RD STE 503 STREET ADDRESS STREET ADDRESS TAMPA FL CITY ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THEF GRAMLING, J. MICHAEL NAME NAME 9205 CONNECHUSETT RD. STREET ADORESS STREET ADDRESS TAMPA FL 33687 CHY-ST-ZIP CHY-S1-7IP DOF Delete TITLE ☐ Change ☐ Addition LUTHIN, CHUCK NAME NAME PO BOX 7450 STREET ADDRESS STREET ADDRESS CLEARWATER FL 33758-7450 CITY-ST-ZIP CITY-ST-7IP THEF Delete TIME WALKER, JAMES C NAME NAME 4423 MELROSE AVE. STREET ADDRESS STREET ADDRESS **TAMPA FL 33629** CITY ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.9. 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 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered. CITY-ST-71P

- James Walker

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