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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

E ADDITIA DILI 1808A MIKI 1808A IRRI ARRI ARRI OKOKI DIDIK BIDIK BIDIK DIRKI DIRKI 1806

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J73730

(0)

STEPHEN R. BOWEN CONSTRUCTION, INC.

D												
Principal Place			Mailing Address	_				1 169419 BIS 1998 MIII		- 	4/5 /: 4 /4	# # 1011 1001
20431 BOWEN I			20431 BOWEN ROAL NORTH FORT MYER		3. Date Incorporated or Qualified 05/18/1987 4. FEI Number 59-2824165							
US			US									
									r Qualified	E .	ate of Last 14/1996	Report
2. Principal Pl	ace of Business		2a. Mailing Addres	is						1 001		Applied For
21			26					59-2824165			h	Not Applicable
Suite, Apt a	#, etc		Suite, Apt. #, et	tc.			- E	Certificate of Status	Donigod			Additional
22	· · · · · · · · · · · · · · · · · · ·		27			,	J.	Certificate of Stards	Desired		Fee	Required
City & State	9		City & State				6.	Election Campaign	_	_		May Be
23	Country		[28] Zip		Country		···	Trust Fund Contribu				to Fees
24 Z-1p	25		29	30	Journey		8.	This corporation has			tax under	s. 199.032,
24	9, Name and Addre	ss of Current F	<u> </u>	[30]	·····		10.	Florida Statutes Name and Address		-		***************************************
BOW	EN, STEPHEN R.		<u> </u>		81	Name					8	
	1 BOWEN ROAD					0						
	TH FORT MYERS FL	33917			82	Street A	address (P.	O. Box Number is N	ot Accepta	Die)		
,,,,,,,					83				·····			
					0.6	City						. 0
					84	City				FL	85 Zij	Code
11. Pursuant I	o the provisions of Sect	ons 607.0502 a	ind 607 1508, Florida	Statutes, the	e above	named o	corporation	submits this statem	ent for the	nurnose o	f changing	its registered
ornce or re agent 1 ar	egistered agent or both m famil ar with and acc	, in the st ite of opt th y g oliga s	yurida. Such change ris of, Section 607.05	e was author 505, Florida f	ized by Statutes	the corp	oration's b	oard of directors. I h	ereby acce	pt the app	ointment a	s registered
			1								-97	
	X Just	_ K. XJ	Tive	Stepn	en r	Bowe	an, Pr	esiaent		T T/1		
SIGNATURE.	Signar in Type I or planted dama		for the if applicable 1	(NOTE: Regis	tered Age		required when			DATE		
SIGNATURE.	O	of registers aspect a -FICERS AND I	DIRECTORS	(NOT(: Begis	tered Age		required when		ES TO OFFI	DATE	D DIRECTO	
SIGNATURE. 12. THEE	PST	FICERS AND [(NOTE: Regis	itered Age 13, .1 TITLE		required when	reinstating) ADDITIONS/CHANGI		DATE		
SIGNATURE. 12. TIBLE NAME	PST BOWEN, STEPHEN	FICERS AND D	DIRECTORS	(NOTE: Regis	Tered Age 13, .1 TITLE .2 NAME	nt signature i	PT BOWE	reinstating) ADDITIONS/CHANGI N, STEPHEN	R.	DATE	D DIRECTO	
SIGNATURE. 12. TBLE NAME STREET ADDRESS	PST BOWEN, STEPHEN 20431 BOWEN ROA	FICERS AND D	DIRECTORS	(NOTE: Regis	itered Age 13, .1 TITLE .2 NAME .3 STREET	nt signature i	PT BOWE 2043	reinstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA	R. D	DATE	D DIRECTO	
SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL	FICERS AND D	DIRECTORS DELE	(NOTE: Regs 1 TE 1 1 1	itered Age 13, 1 TITLE 2 NAME 3 STREET 4 CITY-S	nt signature i	PT BOWE 2043	reinstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA	R.	DATE	D DIRECTO	Addition
SIGNATURE 12. TIDLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D	FICERS AND D	DIRECTORS	(NOTE: Begs 1 1 1 1 1 1 1 1 1 2 2	13, .1 TITLE .2 NAME .3 STREET .4 CITY-S .1 TITLE	nt signature i	PT BOWE 2043	reinstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA	R. D	DATE	D DIRECTO	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN	FICERS AND D R. D R.	DIRECTORS DELE	(NOTE Regs 1) TE 1 1 1 1 2 TE 2	13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE	ent signature i ADDRESS T-ZIP	PT BOWE 2043	reinstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA	R. D	DATE	D DIRECTO	Addition
SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY- ST. ZIP TITLE NAME STREET ADDRESS	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA	FICERS AND D R. D R.	DIRECTORS DELE	(NOTE Begs 1 1 1 1 1 1 1 1 1 1 2 2 2 2 2	13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET	ADDRESS T-ZIP ADDRESS	PT BOWE 2043	reinstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA	R. D	DATE	D DIRECTO	Addition
SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL	FICERS AND D R. D R.	DIRECTORS DELE	(NOTE Begs 1) TE 1 1 1 1 1 2 2 2 2	13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET 4 CITY-S 4 CITY-S 4 CITY-S	ADDRESS T-ZIP ADDRESS	PT BOWE 2043 N. F	reinstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA	R. D	DATE	D DIRECTO K Change	Addition
SIGNATURE. 12. TBLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE: Region 1) ITE 1 1 1 1 1 2 2 2 2 2 3 3 4 4 5 6 6 7 7 8 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 8 7 8 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 8 7 8 8 8 8 8 8 8 8 8 8 8 8 8	13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 4 CITY-S 1 TITLE	ADDRESS T-ZIP ADDRESS	PT BOWE 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	D DIRECTO	Addition
SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE Begs 1) ITE 1 1 1 1 2 2 2 2 ITE 3 3 3	I TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 4 CITY-S 1 TITLE 2 NAME 4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP	PT BOWE 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	D DIRECTO K Change	Addition
SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY- ST. ZIP TITLE NAME STREET ADDRESS CITY- ST. ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE Begs 1) ITE 1 1 1 1 1 2 2 2 2 2 TTE 3 3 3 3	I TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET 4 CITY-S † TITLE 2 NAME 3 STREET 4 CITY-S † TITLE 2 NAME 3 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	D DIRECTO K Change	Addition
SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE Begs 1) TE 1 1 1 1 1 1 2 2 2 2 2 TTE 3 3 3 3 3	I Hered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition
SIGNATURE 12. TOTALE NAME STREET ADDRESS CITY- ST-ZIP TITLE	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE Begs 1) TE 1 1 1 1 1 1 2 2 2 2 2 2 3 3 3 3	I TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET 4 CITY-S † TITLE 2 NAME 3 STREET 4 CITY-S † TITLE 2 NAME 3 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	D DIRECTO K Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE Beys 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME	ADORESS T-ZIP ADORESS ST-ZIP ADORESS ST-ZIP	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE Reps.) ITE 1 1 1 1 1 1 2 2 2 2 2 3 3 3 TE 4 4	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE	(NOTE Begs 1) TE 1 1 1 1 1 2 2 2 2 2 2 TE 3 3 3 3 3 TIF 4 4 4	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST- ZIP	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE DELE	(NOTE Registration of the state	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE DELE	(NOTE Report 1) ITE	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE DELE	(NOTE Report 1) ITE	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE DELE	(NOTE Region 1) ITE	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 3 STREET 4 CITY-S 1 TITLE 3 STREET 5 NAME 5 STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE DELE	NOTE Region 1	Intered Age 13. 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 4 CITY-S 3 STREET 4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition
SIGNATURE 12. TDLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE DELE	NOTE Region 1	IFFED AGE 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition
SIGNATURE 12. TIDLE NAME SIREET ADDRESS CITY- ST- ZIP TITLE NAME	PST BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL D BOWEN, STEPHEN 20431 BOWEN ROA N. FT. MYERS FL VP JEFFCOAT, JOEL G 1437 DUBONNET C	FICERS AND D R. D R. D	DIRECTORS DELE DELE	NOTE Register 1	IFFED AGE 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 2 NAME 3 STREET 4 CITY-S 1 TITLE 2 NAME 3 STREET 4 CITY-S 1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	PT BOWEI 2043 N. F	renstating) ADDITIONS/CHANGI N, STEPHEN 1 BOWEN ROA T. MYERS F	R. D L	DATE	Change	Addition Addition Addition Addition

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen, R Bowen, President 1-10-97

Date

941-731-7077

0401631

Daytime Phone #