2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K49972

FILED Feb 27, 2006 Secretary of State

Entity Name: BOWE'S TRACTOR SERVICE, INC.	-
Current Principal Place of Business:	New Principal Place of Business:
P.O. BOX 152 311 PALM AVE BOCA GRANDE, FL 33921	P. O. BOX 878 5001 WOODFIELD RD PLACIDA, FL 33946
Current Mailing Address:	New Mailing Address:
P.O. BOX 152 311 PALM AVE BOCA GRANDE, FL 33921	P. O. BOX 878 PLACIDA, FL 33946
FEI Number: 65-0094591 FEI Number Applied For () FEI Number	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
BOWE, HAROLD, J 311 PALM AVE BOCA GRANDE, FL 33921 US	BOWE, HAROLD, J 6775 PLACIDA RD PLACIDA, FL 33946 US
The above named entity submits this statement for the purpose of in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE:	02/27/2006
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: DP () Delete Name: BOWE, HAROLD J., Address: 311 PALM AVENUE City-St-Zip: BOCA GRANDE, FL	Title: DP (X) Change () Addition Name: BOWE, HAROLD J Address: 6775 PLACIDA RD City-St-Zip: PLACIDA, FL 33946
Title: () Delete Name: Address: City-St-Zip:	Title: VP () Change (X) Addition Name: BOWE, DALE E Address: 18438 TEMPLE AVE City-St-Zip: PORT CHARLOTTE, FL 33948
Title: () Delete Name: Address: City-St-Zip:	Title: S () Change (X) Addition Name: BOWE, TRACEY E Address: 6775 PLACIDA RD City-St-Zip: PLACIDA, FL 33946

I hereby certify that the information supplied with this filing does not qualify for the 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: DALE E BOWE VP 02/27/2006