

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # K92998 1. Entity Name COW SLOUGH, INC.					
Principal Place of Business 1025 COUNTY ROAD 17 NORTH LAKE PLACID, FL 33852			Mailing Address 1025 COUNTY ROAD 17 NORTH LAKE PLACID, FL 33852		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		04062005 Chg-P CR2E034 (10/03)	
4. FEI Number 59-2952218				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SMOAK, MASON G 1025 COUNTY ROAD 17 NORTH LAKE PLACID, FL 33852			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SMOAK, EDWARD L JR. 1025 COUNTY ROAD 17 NO LAKE PLACID, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SMOAK, JOHN F III 1025 COUNTY ROAD 17 N LAKE PLACID, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMOAK, MASON G 1025 COUNTY RD 17 NORTH LAKE PLACID, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS EURES, LEIGH S. 1025 COUNTY RD. 17 N. LAKE PLACID, FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SMOAK, PHILIP L 1025 COUNTY RD 17 N. LAKE PLACID, FL 33852	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVPD SMOAK, SAMANTHA L 1025 CR 17 NORTH LAKE PLACID, FL 33852	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 like empowered.			04/25/05-80026-012 150.00		
SIGNATURE: <i>John Amock III</i> JOHN F. SMOAK III, President			4/22/05 863-465-2561 Date Daytime Phone #		