FILE NOW: FILING FEE AFTER MAY 1 IS $225.00 6/10

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3: 11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M96594 (0)

1. Corporation Name
DOWELL ENTERPRISES, INC.

Principal Place of Business
% DAVID R. DOWELL
~~1200 N. STONE ST.~~
~~DELAND FL 32720~~

Mailing Address
% DAVID R. DOWELL
~~1200 N. STONE ST.~~
~~DELAND FL 32720~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/26/1988
3a. Date of Last Report: 04/21/1994

2. Principal Place of Business
21 300 International Pkwy.
Suite, Apt. #, etc.
22 Suite 250
City & State
23 Heathrow, Florida
Zip 24 32746
Country 25 USA

2a. Mailing Address
26 300 International Pkwy.
Suite, Apt. #, etc.
27 Suite 250
City & State
28 Heathrow, Florida
Zip 29 32746
Country 30 USA

4. FEI Number: 59-2914787
Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.033 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
DOWELL, DAVID R.
1200 N. STONE ST.
DELAND FL 30272

10. Name and Address of New Registered Agent
81 Name: David R. Dowell
82 Street Address (P.O. Box Number is Not Acceptable): 300 International Pkwy., Ste. 250
83
84 City: Heathrow, FL
85 Zip Code: 32746

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (Signature of printed name of registered agent or title of officer) _____ (Apt. Registered Agent signature required after resignation) _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D ☒ Change ☐ Addition
NAME	DOWELL, DAVID R.	1.2 NAME	Dowell, David R.
STREET ADDRESS	1200 N. STONE ST.	1.3 STREET ADDRESS	300 International Pkwy., Ste. 250
CITY, ST, ZIP	DELAND FL	1.4 CITY, ST, ZIP	Heathrow, Florida 32746
TITLE	D	2.1 TITLE	D ☒ Change ☐ Addition
NAME	DOWELL, CLYDE R.	2.2 NAME	Dowell, Clyde
STREET ADDRESS	2820 SUN LAKE LOOP #102	2.3 STREET ADDRESS	227 Wimbledon Circle
CITY, ST, ZIP	LAKE MARY FL	2.4 CITY, ST, ZIP	Heathrow, Florida 32746
TITLE	D	3.1 TITLE	D ☒ Change ☐ Addition
NAME	DOWELL, EVELYN J.	3.2 NAME	Dowell, Evelyn
STREET ADDRESS	2820 SUN LAKE LOOP #102	3.3 STREET ADDRESS	227 Wimbledon Circle
CITY, ST, ZIP	LAKE MARY FL	3.4 CITY, ST, ZIP	~~Heahtrow, FL 32746~~
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(bb), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or is an attachment with an address.

SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — 4/6/95 Date — 407/333-0456 Daytime Phone — D

0030007 CP