


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N95000005839</b> 1. Entity Name THE ROBERT A. DOWLING FOUNDATION, INC.	
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Principal Place of Business C/O BUTZEL LONG 1200 N. FEDERAL HIGHWAY SUITE 420 BOCA RATON, FL 33432	Mailing Address C/O BUTZEL LONG 1200 N. FEDERAL HIGHWAY SUITE 420 BOCA RATON, FL 33432
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01252007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0641756	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  RAYMOND, JOHN J ESQ. BUTZEL LONG 1200 N. FEDERAL HWY STE 420 BOCA RATON, FL 33432
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

Filing Fee Is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOWLING, ROBERT A C/O 101 SE 6TH AVE STE A DELRAY BEACH, FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, WAYNE S PATELCO, BOX 240 ROTTERDAM JCT., NY 121500249
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RAYMOND, JOHN J JR 1200 N FEDERAL HWY SUITE 420 BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000674894  
03/29/07-80081-019 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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.
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SIGNATURE: <u>Mary Alice Underwood POA for Robert Dowling</u> 2/14/07 561-276-3821 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>MARY ALICE UNDERWOOD</u> <small>Daytime Phone #</small>
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