

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002089

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** THE LOWRIE FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

C/O TUBBS & BARTNICK, P.A.  
2300 GLADES ROAD, SUITE 415E  
BOCA RATON, FL 33431

**New Principal Place of Business:**

C/O TUBBS & BARTNICK, P.A.  
2101 NW CORPORATE BLVD., SUITE 317  
BOCA RATON, FL 33431

**Current Mailing Address:**

C/O TUBBS & BARTNICK, P.A.  
2300 GLADES ROAD, SUITE 415E  
BOCA RATON, FL 33431

**New Mailing Address:**

C/O TUBBS & BARTNICK, P.A.  
2101 NW CORPORATE BLVD., SUITE 317  
BOCA RATON, FL 33431

FEI Number: 65-0894345

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TUBBS, STEVEN  
2300 GLADES RD  
SUITE 415E  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

TUBBS, STEVEN  
2101 NW CORPORATE BLVD.,  
SUITE 317  
BOCA RATON, FL 33431 US

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.

SIGNATURE: \_\_\_\_\_

04/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOWRIE, DOUGLAS A  
Address: C/O TUBBS & BARTNICK, P.A.  
City-St-Zip: BOCA RATON, FL 33431

Title: ST  
Name: LOWRIE, JUDITH D  
Address: C/O TUBBS & BARTNICK, P.A.  
City-St-Zip: BOCA RATON, FL 33431

Title: D  
Name: LOWRIE, LYNN  
Address: C/O TUBBS & BARTNICK, P.A.  
City-St-Zip: BOCA RATON, FL 33431

Title: D  
Name: TUBBS, STEVEN R  
Address: C/O TUBBS & BARTNICK, P.A.  
City-St-Zip: BOCA RATON, FL 33431

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUG LOWRIE

PRES

04/15/2012

Electronic Signature of Signing Officer or Director

Date