2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N98000002727

4. Entity Name



FILED Mar 09, 2004 8:00 am **Secretary of State**

03-09-2004 90051 048 ****61.25

THE TOW	VE FAMILY FOUNDATION,			7	
Principal Place of Business		Mailing Address			
1301 RIVERPLACE BLVD., STE- 2640 JACKSONVILLE FL 32207		1301 RIVERPLACE BLVD., STE. 2640 JACKSONVILLE FL 32207			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MOORE CR2E037 (11/03)	
City & State		City & State		4. FEI Number	
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required	
ļ <u> </u>	6. Name and Address of Current	Registered Agent	1	7. Name and Address of New Registered Agent	
			Name		
ANDERSON, KENNETH G 1301 RIVERPLACE BLVD., STE. 2640			Street Address	s (P.O. Box Number is Not Acceptable)	
JAC	CKSONVILLE FL 32207				
			City	FL Zip Code	
	tions of registered agent.	or the purpose of changing its r	egistered office or regist	tered agent, or both, in the State of Florida. I am familiar with, and a	ccept
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable. (NOTE:	Registered Agent signature requir	red when reinstating) DATE	
	FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Cam Trust Fund C		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State	
10.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	TOWE, ROLF H	☐ Delete	TITLE	Change /	Addition
NAME STREET ADDRESS	OD BOOKHOOD LANE		NAME STREET ADORESS	•	
CITY-ST-ZIP	GREENWICH CT 06830		CITY-ST-ZIP		
TILE	DP	☐ Delete	TITLE	☐ Change ☐ /	Addition
NAME	TOWE, NEELY P		NAME		
STREET ADDRESS	63 ROCKWOOD LANE		STREET ADDRESS		
CITY-ST-ZIP	GREENWICH CT 06830		CITY-ST-ZIP		
IIILE	DV TOWE, CHRISTOPHER W	☐ Delete	TITLE	Change]	Addition i
NAME STREET ADDRESS		ن مستعددونید باز بینده ب	- STREET ADDRESS	المراجعة والمستخدم المنافقة المنافقة المنافقة والمنافقة	
CITY-ST-ZIP	GREENWICH CT 06830	•	CITY-ST-ZIP		
TITLE	DV	☐ Delete	TITLE	⊘ Change □	Addition
NAME	TOWE EGAN, N. ANNE 2 1 EDGEWOOD ROAU	•	NAME	104 VA . 1-Com 2 2 1	
STREET ADDRESS CITY-ST-ZIP	PITTEBURGH PA 15215		STREET ADDRESS 4	BILLYACHT CLUB ROAD ACICSONVILLE, FL 32210	
TITLE		☐ Delete	TITLE		Addition
NAME		LI Delete	NAME		
STREET ADDRESS		•	STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP		
TITLE		Delete	TITLE	☐ Change ☐	Addition
NAME PERCET ADDRESS			NAME STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	,		STREET ADDRESS CITY-ST-ZIP		
5 51. 21.					

Intereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(j). Florida Statisties. 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR