


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90005 049 ****61.25

DOCUMENT # N98000002727					
1. Entity Name THE TOWE FAMILY FOUNDATION, INC.					
Principal Place of Business 1301 RIVERPLACE BLVD., STE. 2640 JACKSONVILLE, FL 32207			Mailing Address 1301 RIVERPLACE BLVD., STE. 2640 JACKSONVILLE, FL 32207		
2. Principal Place of Business - No P.O. Box # 4789 APALACHEE ST.		3. Mailing Address 4789 APALACHEE ST.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State JACKSONVILLE, FL		City & State JACKSONVILLE, FL		4. FEI Number 59-3509411	
Zip 32210		Country DUVAL		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 ANDERSON, KENNETH G 1301 RIVERPLACE BLVD., STE. 2640 JACKSONVILLE, FL 32207			7. Name and Address of New Registered Agent Name: ROLF H. TOWE Street Address (P.O. Box Number is Not Acceptable): 4789 APALACHEE STREET City: JACKSONVILLE FL Zip Code: 32210		
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: <u>ROLF H TOWE</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE: <u>23 JANUARY 2008</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST <input type="checkbox"/> Delete TOWE, ROLF H 63 ROCKWOOD LANE GREENWICH, CT 06830		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4789 APALACHEE STREET JACKSONVILLE, FL 32210	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP <input type="checkbox"/> Delete TOWE, NEELY P 63 ROCKWOOD LANE GREENWICH, CT 06830		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4789 APALACHEE STREET JACKSONVILLE, FL 32210	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV <input type="checkbox"/> Delete TOWE, CHRISTOPHER W 315 EAST 68TH STREET, APARTMENT 9A NEW YORK, NY 10021		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV <input type="checkbox"/> Delete EGAN, ANNE T 4227 FOREST PARK ROAD JACKSONVILLE, FL 32210		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
SIGNATURE: <u>ROLF H TOWE</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			DATE: <u>23 JANUARY 2008</u> <small>Date</small>		
DAYTIME PHONE: <u>203-629-1661</u> <small>Daytime Phone #</small>					