## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P00000086320**

1. Entity Name

KENNETH A. LOWE, INC.



01-29-2004 90021 017 \*\*\*150.00

**FILED** 

Jan 29, 2004 8:00 am Secretary of State

Principal Place of Business

1434 W FAIRBANKS AVE WINTER PARK, FL 32789 Mailing Address

1434 W FAIRBANKS AVE WINTER PARK, FL 32789



01062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3671477

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOWE, KENNETH A 1434 W FAIRBANKS AVE WINTER PARK, FL 32789

## DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature typed or printed were of registered agent.  FILE NOWILL FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  D LOWE, KENNETH A  1434 FAIRBANKS AVE WINTER PARK, FL 32789  TITLE NAME SIREET ROBESS CITY-ST-2P  TITLE NAME SIRET ROBE							
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  ITILE NAME STREET ADDRESS CITY-ST-ZP WINTER PARK, FL 32789  TUTLE NAME STREET ADDRESS CITY-ST-ZP TUTLE TUTLE NAME STREET ADDRESS CITY-ST-ZP TUTLE NAME NAME STREET ADDRESS CITY-ST-ZP TUTLE NAME NAME STREET ADDRESS CITY-ST-ZP TUTLE NAME STREET ADDRESS TUTLE STREET ADDRESS TUTLE STREET ADDRESS TUTLE STREET	8. The above the obligati	named entity submits this statement for the pions of registered agent.	ourpose of changing its register	ed office or re	egistered agent, or both,	in the State of Florida. I am familiar	with, and accept
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  ITILE NAME STREET ADDRESS CITY-ST-ZPP TITLE NAME N	SIGNATURE					•	
### PROPERTY OF CITY ST-ZIP    TITLE   MAME   STREET ADDRESS   CITY-ST-ZIP    TITLE   MAME		Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Register	ed Agent signature	required when reinstating)	CATE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS	· FIL				\$5.00 May Be Added to Fees		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	10.	OFFICERS AND DIREC	CTORS		•		
STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32789  TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE	Р					
TITLE  MAME SIREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NAME	LOWE, KENNETH A					
TITLE NAME SIREET ADDRESS CITY-ST-ZIP  TITLE NAME TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	STREET ADDRESS	1434 FAIRBANKS AVE					
NAME SIREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	CITY-ST-ZIP	WINTER PARK, FL 32789					
NAME SIREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	TITLE			<b>-</b>			•
TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS	NAME						•
TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	STREET ADDRESS						
NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	CITY-ST-ZIP		The same of the sa	_ ~ -	استيمارا والمادي فيتاه ولادرا والميم	ر الم <del>حدد المحدد المحد</del>	والمساوية
STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	TITLE						
CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME						,
IN THIS SPACE  STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME: STREET ADDRESS STREET ADDRESS	STREET ADDRESS				DO 1	LOT WOITE	
STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME: STREET ADDRESS	CITY-ST-ZIP				DOI	NOI WHILE	
STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME: STREET ADDRESS	TITLE			1	INI T	HIC CDACE	
STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS					IIV I	HIS SPACE	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	, 1			1			
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS	CITY-ST-ZIP	•					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS	TITLE			1			
STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS	•						
CITY-ST-ZIP  TITLE  NAME: STREET ADDRESS							
TITLE NAME STREET ADDRESS						•	
NAME: STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·		-			
STREET ADDRESS	· 1		4				
		·	<del>.</del>	**		•	
G)(1-S)-2 F	1						
40 I hereby again, that the information will this fill also are the fill of the standard of th	UTY-ST-ZIP	<u> </u>					

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of execute this report as required by Chapter 607, 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:** 

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

Kenneth A. Lowe

01/06/04

407-629-7066

Daytime Phone #