

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 8:00 am
Secretary of State

01-07-2005 90020 045 ***150.00

DOCUMENT # P00000093018

1. Entity Name
LOWERY'S VACATION HOMES, INC.



Principal Place of Business
**7864 W IRLO BRONSON WAY
KISSIMMEE, FL 34747**

Mailing Address
**7864 W IRLO BRONSON WAY
KISSIMMEE, FL 34747**

30000030

2. Principal Place of Business
7864 W. IRLO BRONSON HWY
Suite, Apt. #, etc.

3. Mailing Address
7864 W. IRLO BRONSON HWY
Suite, Apt. #, etc.



01042005 Chg-P CR2E034 (10/03)

City & State
KISSIMMEE FL

City & State
KISSIMMEE FL

4. FEI Number
65-1092374

Applied For
Not Applicable

Zip
34747

Country
USA

Zip
34747

Country
USA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MURPHY, DAVID
7864 W. IRLO BRONSON HWY
KISSIMMEE, FL 34747**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DPT
MURPHY, DAVID
7864 W IRLO BRONSON HWY
KISSIMMEE, FL 34747** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
HOWLETT, PETER
7864 W. IRLO BRONSON HWY
KISSIMMEE, FL 34747** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**GM
PETER VAN DEN BROECK
7864 W. IRLO BRONSON HWY
KISSIMMEE FL 34747** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. 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 to 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:

PETER VAN DEN BROECK GM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-04-05
Date

407-3970088
Daytime Phone #