

FILED
May 24, 2002 8:00 am
Secretary of State

04-03-2002 90203 019 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000075550

1. Entity Name

ROWLEY, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1335A NW ST. LUCIE WEST BLVD. SAME

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PORT ST. LUCIE, FL

City & State

SAME

4. FEI Number

05-1135895

Applied For

Not Applicable

Zip

34986

Country

USA

Zip

SAME

Country

SAME

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

7. Name and Address of Current Registered Agent

Name

PINKNEY, PADRICK A. ESQ.

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

145 NW CENTRAL PARK PLAZA

SUITE 200

City

PORT ST. LUCIE

FL

Zip Code

34986-2482

DO NOT WRITE
IN THIS SPACE

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D ROWLEY, JANE 1335A NW ST. LUCIE WEST BLVD. PORT ST. LUCIE, FL 34986	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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DO NOT WRITE
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

JANE ROWLEY, DIR.

MARCH

2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)