

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2005 8:00 am
Secretary of State

07-15-2005 90018 048 ***150.00

DOCUMENT # P04000027627

1. Entity Name
VAN DOW CORPORATION



Principal Place of Business
**995 N COLLIER BLVD
MARCO ISLAND, FL 34145**

Mailing Address
**995 N COLLIER BLVD
MARCO ISLAND, FL 34145**

20064003



2. Principal Place of Business
445 COUNTRY CLUB ROAD
Suite, Apt. #, etc.

3. Mailing Address
415 COUNTRY CLUB ROAD
Suite, Apt. #, etc.

07052005 Chg-P CR2E034 (10/03)

City & State
PHOENIXVILLE PA
Zip
19460
Country
CHESTER

City & State
PHOENIXVILLE PA
Zip
19460
Country
CHESTER

4. FEI Number
20-0604154
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**NOLD, JOHN A
995 N COLLIER BLVD
MARCO ISLAND, FL 34145**

7. Name and Address of New Registered Agent
Name
RICHARD S. DOWNS
Street Address (P.O. Box Number is Not Acceptable)
**C/O CHRISTOPHER REALTY
365 CAPRI BLVD**
City
NAPLES FL Zip Code
34113

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 **RICHARD S. DOWNS** **DIRECTOR, PRESIDENT** **7/10/05**
(NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	DOWNS, RICHARD S	
STREET ADDRESS	995 N COLLIER BLVD	
CITY - ST - ZIP	MARCO ISLAND, FL 34145	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DIRECTOR, PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	415 COUNTRY CLUB ROAD	
CITY - ST - ZIP	PHOENIXVILLE PA 19460	
TITLE	DIRECTOR, SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANN V. DOWNS	
STREET ADDRESS	415 COUNTRY CLUB ROAD	
CITY - ST - ZIP	PHOENIXVILLE PA 19460	
TITLE	DIRECTOR, VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARD D. VANDER NEUT	
STREET ADDRESS	118 BONNET LANE	
CITY - ST - ZIP	NATBORO PA 19040	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **RICHARD S. DOWNS** **7/10/2005** **610-933-9792**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #