2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P04000065354

1. Entity Name
ROWLAND CONSTRUCTION, INC.

FILED
08 SEP 22 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09082008 Chg-P CR2E034 (12/06)

Principal Place of Business	Mailing Address
9903 40 AVE EAST PALMETTO, FL 34221	9903 40 AVE EAST PALMETTO, FL 34221

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 20-1025090 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ROWLAND, ANGELA
9903 40 AVE EAST
PALMETTO, FL 34221

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is $61.25

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ROWLAND, ANGELA 9903 40TH AVE E PALMETTO, FL 34221	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500136271335 09/23/08--01050--002 **70.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ROWLAND, DALE 9903 40TH AVE E PALMETTO, FL 34221	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ☒ Change ☐ Addition
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9/22

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 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: Angela Rowland ANGELA ROWLAND 9/17/08 (941) 722-8515
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #