

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000078169

Entity Name: TOWELL CORPORATION

FILED  
Apr 01, 2005  
Secretary of State

**Current Principal Place of Business:**

10849 FOREST RUN DRIVE  
BRADENTON, FL 34211 US

**New Principal Place of Business:**

7807 18TH AVE W  
PALMA SOLA SOUND  
BRADENTON, FL 34209 US

**Current Mailing Address:**

10849 FOREST RUN DRIVE  
BRADENTON, FL 34211 US

**New Mailing Address:**

FEI Number: 20-1130547

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AMERICAN PIONEERS ADVISORY INC.  
10849 FOREST RUN DRIVE  
BRADENTON, FL 34211 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TOWELL, STEVEN  
Address: 10849 FOREST RUN DRIVE  
City-St-Zip: BRADENTON, FL 34211 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TOWELL, STEVEN  
Address: 7807 18TH AVE W, PALMA SOLA SOUND  
City-St-Zip: BRADENTON, FL 34209 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. TOWELL

P

04/01/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date