

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000120043

FILED
Nov 02, 2005
Secretary of State

Entity Name: FOWLER ENERGY SYSTEMS INC

Current Principal Place of Business:

15248 S. TAMiami TRAIL
SUITE 300
FORT MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

15248 S. TAMiami TRAIL
SUITE 300
FORT MYERS, FL 33908 US

New Mailing Address:

FEI Number: 20-1510756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPENCER, PETER
3322 SW 1ST AVE
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

FOWLER, HOLLEN T
4901 SW 164TH TERRACE
FORT LAUDERDALE, FL 33331 US

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: HOLLEN T. FOLLER

11/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOWLER, HOLLEN T
Address: 4901 S.W. 164TH TERR.
City-St-Zip: FORT LAUDERDALE, FL 33331 US

Title: VP () Delete
Name: SPENCER, PETER
Address: 3322 SW 1ST AVE
City-St-Zip: CAPE CORAL, FL 33914 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CLAYTON, PEGGIE LOU
Address: 4901 S.W. 164TH TERR.
City-St-Zip: FORT LAUDERDALE, FL 33331 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: HOLLEN T FOWLER

PRES

11/02/2005

Electronic Signature of Signing Officer or Director

Date