

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000067858

Entity Name: DARLENE FOWLER INC.

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

357 KEEN TERRACE  
SEBASTIAN, FL 32958

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 780807  
SEBASTIAN, FL 32978

**New Mailing Address:**

FEI Number: 04-3814171

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOWLER, DARLENE A  
357 KEEN TERRACE  
SEBASTIAN, FL 32958 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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: FOWLER, DARLENE A  
Address: P.O. BOX 780807  
City-St-Zip: SEBASTIAN, FL 32978

I hereby 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 all other like empowered.

SIGNATURE: DARLENE FOWLER

PRES

01/30/2011

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

\_\_\_\_\_  
Date