## 2007 FOR PROFIT CORPORATION

**FILED** Mar 12, 2007 08:00 AM Secretary of State

ANNOAL REFURI	
DOCUMENT # P93000075292	
1. Entity Name	
J.D. DOWELL, P.A.	

Principal Place of Business

609 EAST JACKSON STE. 100 TAMPA, FL 33602

Mailing Address 609 EAST JACKSON STE. 100 TAMPA, FL 33602



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CR2E034 (11/05) 01042007 No Chg-P Applied For 4. FEI Number 59-3128858 Not Applicable

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

DOWELL, J.D. 609 EAST JACKSON STE. 100

DO NOT WRITE IN THIS SPACE

TAMPA, F	L 33602			·	LIIO OFACE a, mary sur eday à compa
	named entity submits this statement for the p tions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or both	in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title it	f applicable. (NOTE: Registered	Agent signature	required when roinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finantification.  Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	<del>,</del>		
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12. Thereby 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.

CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. D. Dowell

3-7-07