FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000080710 (3)

ROWLEY & CO., INC.

FILED May 07 1998 8:00am Secretary of State

|--|--|--|

Principal Place	e of Business	Mailing Address			1 100 100 110 10101 01111 00111 00111 00111 00111	2111 60114 19241 11511 4011 1421
19050 SE 42 PL POST OFFICE BOX 327						
MORRISTON FL 32668 US MORRISTON FL 32668		DO NOT WRITE IN THIS SPACE				
09					3. Date Incorporated or Qualified	
					10/20/1995	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3340680	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Statigs Desired L.	Fee Required
City & State City & State			6. Election Campaign Financing	\$5.00 May Be		
23	23 28			Trust Fund Contribution	Added to Fees	
Zip	Country		Zip Country		8. This corporation owes or has paid the c	
24	[25]		30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre		81	Name	10. Name and Address of New Registere	D Agent
	E LAW FIRM OF LAWRENCE J	SPIEGEL CHRTD	61	Name	•	•
	3 ALMERIA AVENUE		82	82 Street Address (P.O. Box Number is Not Acceptable)		
CO	RAL GABLES FL 33134		_	 		
			63	1		
			84	City		85 Zip Code
				1	<u>F</u>	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of registered a	good and title if applicable (NOTE: ND DIRECTORS	Registered Ac	ent signature	re required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ID DIRECTORS IN 12
12.	PVPS	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AT	Change Addition
NAME	ROWLEY, ROBERT V.		1.2 NAME			
STREET ADDRESS	19050 SE 47 PL			T ADDRESS		
CITY-ST-ZIP	MORRISTON FL		1.4 CITY -			
TITLE		DELETE	2.1 TITLE	01-211	<u> </u>	Change Addition
NAME			2.2 NAME			_ , _
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			2. 4 CITY-			
TITLE		☐ DELETE	3 1 TITLE	•••		☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			52 NAME			
STREET ADDRESS			5.3 STREE	1 ADORESS		
CITY - ST - ZIP		··	5.4 CITY	ST-ZIP		
TITLE		DELETE	6 1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADORESS		
CITY-ST-ZIP			64 CITY-	ST-ZIP		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on any flactment with an address.