

2001 UNIFORM BUSINESS REPORT (UBR)

5/10

FILED
Jul 02, 2001 8:00 am
Secretary of State

05-16-2001 90254 015 ***150.00

DOCUMENT # P 95000080710
 1. Entity Name
 Rowley & Co., Inc. (CA)

Principal Place of Business: 19050 SE 47 Place, Morriston, FL 32668
 Mailing Address: PO Box 327, Morriston, FL 32668

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.
 City & State: City & State
 Zip: Zip Country: Country

4. FEI Number: 59-3340680 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
~~The Law Firm of Lawrence J. Spiegel Chrt. 343 Almeria Avenue Coral Gables, FL 33134~~

7. Name and Address of New Registered Agent
 Name: Robert V. Rowley
 Street Address (P.O. Box Number is Not Acceptable): 19050 SE 47 Place
 City: Morriston FL Zip Code: 32668

8. 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: Robert V. Rowley DATE: 6/28/01
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-issuing)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: PVPS	<input type="checkbox"/> Delete
NAME: Robert V. Rowley	
STREET ADDRESS: 19050 SE 47th Place	
CITY-ST-ZIP: Morriston, FL 32668	
TITLE: [Blank]	<input type="checkbox"/> Delete
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	
TITLE: [Blank]	<input type="checkbox"/> Delete
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	
TITLE: [Blank]	<input type="checkbox"/> Delete
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	
TITLE: [Blank]	<input type="checkbox"/> Delete
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	
TITLE: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	
TITLE: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	
TITLE: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: [Blank]	
STREET ADDRESS: [Blank]	
CITY-ST-ZIP: [Blank]	

13. I hereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. V. Rowley DATE: 4/30/01 (352) 528-5788
Signature and typed or printed name of signing officer or director

CR2E034 (11/00)