

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092182 (1)

1. Corporation Name

DOWD MANAGEMENT INC.



Principal Place of Business

8084 WEST MCNAB ROAD STE 480
NO. LAUDERDALE FL 33068

Mailing Address

8084 WEST MCNAB ROAD STE 480
NO. LAUDERDALE FL 33068

3. Date Incorporated or Qualified

12/04/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 6766 NW 70th Avenue

26 8084 WEST MCNAB ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 SUITE 480

City & State

City & State

23 Tamarac, FL

28 N. LAUDERDALE, FL

Zip

Country

Zip

Country

24 33321

25 USA

29 33068

30 USA

5. Certificate of Status Desired

8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOWD, SUSAN H
8084 WEST MCNAB ROAD STE 480
NO. LAUDERDALE FL 33068

81 Name SUSAN H FORRAY DOWD

82 Street Address (P.O. Box Number is Not Acceptable)
6766 NW 70th Avenue

83

84 City Tamarac, FL 85 Zip Code 33321

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

Susan H. Forray Dowd
Signature, typed or printed name of registered agent and title if applicable

President - SUSAN H. FORRAY DOWD

Date

4-20-96

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DOWD, SUSAN H
STREET ADDRESS 8084 WEST MCNAB ROAD STE 480
CITY-ST-ZIP NO. LAUDERDALE FL 33068

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

12 NAME SUSAN H. FORRAY DOWD
13 STREET ADDRESS 6766 NW 70th Avenue
14 CITY-ST-ZIP Tamarac, FL 33321

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 637, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Susan H. Forray Dowd*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/96 984-720-2047
Date Day/Time Phone #

CR2E034 (12/95)