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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000032599 (7) DOCUMENT

Principal Place of Business	Mailing Address
7011 - 301 BLVD.	7011 - 301 BLVD.
SARASOTA FL 34243	SARASOTA FL 34243

FILED Apr 27 1998 8:00am Secretary of State

BOWLEES CREEK DEVELOPMENT, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/10/1997 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0766816 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 26 Added to Fees Zip Zιρ Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name SABA, RICHARD D 2033 MAIN STREET, STE. 303 Street Address (P.O. Box Number is Not Acceptable) 82 SARASOTA FL 34237 83 84 City 85 Zip Code 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 agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE BENNETT, MICHAEL S NAME 1.2 NAME 7011 - 301 BLVD. STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34243 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY - ST - ZIP

14. Thereby certify that the information supprindicated on this annual report or sofficer or director of the corporate Block 12 or Block 13 if changes of the corporate that the corporate of the In his titing the not quality for the exemption stated in Section 119.07(3)(i), Fiorica Statutes, Frontier County with the first and an analysis and accurate and that my signature shall have the same legal effect as if made under oath; that I am an iver of trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

SIGNATURE

Michael S. Bennett

4-20-98