
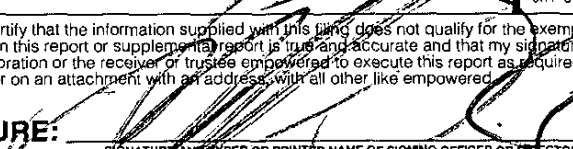


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90018 042 ***150.00

DOCUMENT # P97000032599 1. Entity Name BOWLEES CREEK DEVELOPMENT, INC.																																			
Principal Place of Business 7011 - 301 BLVD. SARASOTA, FL 34243		Mailing Address 7011 - 301 BLVD. SARASOTA, FL 34243																																	
2. Principal Place of Business 7011 15th St. E Suite, Apt. #, etc.		3. Mailing Address 7011 15th St E Suite, Apt. #, etc.																																	
City & State Sarasota FL Zip 34243		City & State Sarasota FL Zip 34243																																	
4. FEI Number 65-0766816		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent BENNETT, MICHAEL S 7011 301 BLVD 7011 15th St E. SARASOTA, FL 34243		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																	
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. I am familiar with, and accept the obligations of registered agent.																																			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">D</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width:70%;"></td> </tr> <tr> <td>NAME</td> <td colspan="3">BENNETT, MICHAEL S</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="3">7011 301 BLVD. 7011 15th St E</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="3">SARASOTA, FL 34243</td> </tr> </table>		TITLE	D	<input type="checkbox"/> Delete		NAME	BENNETT, MICHAEL S			STREET ADDRESS	7011 301 BLVD. 7011 15th St E			CITY-ST-ZIP	SARASOTA, FL 34243			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;"></td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td style="width:70%;"></td> </tr> <tr> <td>NAME</td> <td colspan="3"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="3"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="3"></td> </tr> </table>		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		NAME				STREET ADDRESS				CITY-ST-ZIP			
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12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.																																			
SIGNATURE: 		Date 1-9-04 (941) 756-5547																																	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>																																	