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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000049612 (9)

ROWLAND HOME SERVICES, INC.

FILED May 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					r annereder eine harie jamer dateir ansier neist neitit nifeld falle dieße biede biede inde
40 5TH ST P O BOX 132					
SHALIMAR FO	L 32579	SHALIMAR FL 32579			DO NOT WOITE IN THE COACE
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
					06/02/1997
2. Principal F	Place of Business	2a. Mailing Address	Mailing Address		4. FEI Number 4. 4. Applied For
21		26	26		59-3448738 Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22	- 	27			Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
Zip Country			Zip Country		Trust Fund Contribution Added to Fees
24	25	29	30	nı y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
= -	9. Name and Address of Curr		1901		10. Name and Address of New Registered Agent
RO	WLAND, KENNETH A			91 Name	
	5TH ST		ļ,	S Street	I Address (P.O. Box Number is Not Acceptable)
SHALIMAR FL 32579			82 Street Ar		t Address (F.O. Box Number is Not Acceptable)
			1	33	
			ļ.	34 City	■■ 85 Zip Code
					FL
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 apent, or both, in the State of Florida, Such change was authorized by the corporation's hoard of directors. Thereby accept the appointment as 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. Lam familiar with, and accept the obligations of, Station 607.050f, Florida Statules.					
SIGNATURE Status 1-1-1 of periodic forms of to produce Land of real late types able (NOTH Registerio Age at signatural required when reinstating) DATE DATE					
12.	OFFICERS A	ND DIRECTORS	(N:)III Hegisteren .	Agent signatur	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	☐ DELETE		1.1 TITL	F	
NAME			1.2 NAN		PRESIDENT KENNETH 4 ROWLAND 40 5TH ST SHALIMAR FL 32579
STREET ADDRESS			1.3 STR	EET ADDRESS	40 STH ST
CITY-ST-ZIP	-ST-ZIP		1.4 CITY	- ST- ZIP	SHALIMAL FL 32579
TITLE	☐ DELETE		2.1 TITL	F	Change Addition
NAME			2.2 NAM	IE .	
STREET ADDRESS			2.3 STRI	EET ADDRESS	
CITY-ST-ZIP				V-ST-ZIP	
TITLE		☐ DELETE	3.1 TITL		Change Addition
NAME CARREST ARREST OF			3.2 NAM		
STREET ADDRESS CITY-ST-ZIP				EFT ADDRESS	
TITLE		DELETE	3.4. Cil ⁴	r - \$1 - ZIP	Change Addition
NAME		- Street	4.1 NIL		Change C Adollon
STREET ADDRESS				E1 ADDRESS	
CITY-ST-ZIP				-ST-ZIP	
TITLE		DELETE	5.1 1171	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			5.2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP				-ST-ZIP	
TITLE		☐ DELF1E	61 1111		Change Addition
NAME			6.2 NAM	E	
STREET ADDRESS			6.3 \$1RE	ET ADDRESS	
CITY-ST-ZIP			6.4 CITY	- ST - ZIP	
14 hereby c	artifuthat the information number of	with this tilian shoop as a multi-	fular the sum		and in Continue 440 07/0V/) Florida Contrato 44 at a contrato

nereby 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 logal effect as if made under oath; that I am an officer or director of the corporation on 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 or in attachment with an address.