

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

03-14-2001 90523 017 \*\*\*150.00

0291075

**DOCUMENT # P97000079356**

1. Entity Name

**TAMMY BOWEN, E.A., P.A.**

Principal Place of Business

Mailing Address

1601 FORUM PLACE  
 906  
 W. PALM BEACH FL 33401  
 US

1601 FORUM PLACE  
 906  
 W. PALM BEACH FL 33401  
 US

2. Principal Place of Business

3. Mailing Address

1551 Forum Pl.  
 Ste 500B

1551 Forum Pl.  
 Ste 500B

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0778112**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOWEN, TAMMY**  
**1601 FORUM PLACE**  
**STE 906**  
**W PALM BCH FL 33401**

Name

Street Address (P.O. Box Number is Not Acceptable)

1551 Forum Place, Ste 500B

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME **DPS**  
 STREET ADDRESS **BOWEN, TAMMY**  
 CITY-ST-ZIP **1601 FORUM PLACE, STE 906**  
**W. PALM BEACH FL 33401**

TITLE  
 NAME  
 STREET ADDRESS **1551 Forum Pl. Ste 500B**  
 CITY-ST-ZIP

TITLE  
 NAME **DVT**  
 STREET ADDRESS **BOWEN, RANDY**  
 CITY-ST-ZIP **1601 FORUM PLACE STE 906**  
**W. PALM BEACH FL 33401**

TITLE  
 NAME  
 STREET ADDRESS **1551 Forum Pl. Ste 500B**  
 CITY-ST-ZIP

TITLE  
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 CITY-ST-ZIP

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)