### SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

## PROFIT CORPORATION ANNUAL REPORT

19**9**8



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000100112 (6)

ROWLAND INTEREST, INC.

# FILED Aug 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 3130 YATTIKA PLACE 3130 YATTIKA PLACE LONGWOOD FL 32779 LONGWOOD FL 32778 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/18/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year intangible 29 Personal Property Tax due June 30. \_\_ Yes 25 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 POOLE, WILLIAM F IV **644 WEST COLONIAL DRIVE** Street Address (P.O. Box Number Is Not Acceptable) 82 ORLANDO FL 32804 83 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. n TITLE 1.1 TITLE DELETE Change Addition ROWLAND, AL NAME 1.2 NAME 3130 YATTIKA PLACE STREET ADDRESS 1.3 STREET ADDRESS LONGWOOD FL 32779 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE L Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change \_\_\_ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIE

14. I hereby certify that the information supplied with this filing does not justify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supply mental annual report is type 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 of trusted proviousered 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 on an attackment with an address.

SIGNATURE:

8-3-98 407805.9771

CR2E034 (5/98)