

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050520

FILED  
May 04, 2004  
Secretary of State

Entity Name: ROBERT A. FOWLER, INC.

## Current Principal Place of Business:

5700 SE 22ND ST  
OCALA, FL 34471 US

## New Principal Place of Business:

139 SALTWIND CIRCLE  
NEPTUNE BEACH, FL 32266 US

## Current Mailing Address:

5700 SE 22ND ST  
OCALA, FL 34471 US

## New Mailing Address:

139 SALTWIND CIRCLE  
OCALA, FL 34471 US

FEI Number: 59-3515670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOWLER, ROBERT A  
5700 SE 22ND ST  
OCALA, FL 34471

## Name and Address of New Registered Agent:

FOWLER, ROBERT A  
139 SALTWIND CIRCLE  
NEPTUNE BEACH, FL 32266

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: ROBERT A FOWLER

05/04/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FOWLER, ROBERT  
Address: 5700 S.E. 21ST PLACE  
City-St-Zip: OCALA, FL 344715808

Title: D ( ) Delete  
Name: FOWLER, BARBARA A  
Address: 5700 S.E. 21ST PLACE  
City-St-Zip: OCALA, FL 344715808

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FOWLER, ROBERT  
Address: 139 SALTWIND CIRCLE  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D (X) Change ( ) Addition  
Name: FOWLER, BARBARA A  
Address: 139 SALTWIND CIRCLE  
City-St-Zip: NEPTUNE BEACH, FL 32266

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A FOWLER

D

05/04/2004

Electronic Signature of Signing Officer or Director

Date