PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000075425

1. Corporation Name

COWBOY INVESTORS, INC.

Principal Place of Business	Mailing Address
4600 CAMINO REAL	4600 CAMINO REAL
SARASOTA FL 34231	SARASOTA FL 34231

Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90036 026 ***150.00



Principal Place of Business	Mailing Address			-	iiii 1868: Silii GiSiS lisai siii isai
4600 CAMINO REAL SARASOTA FL 34231	4600 CAMINO REAL SARASOTA FL 34231			DO NOT WRITE IN TH	IIS SPACE
	_			3. Date Incorporated or Qualifed 08/28/1998	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			65-0863124	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		-	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be—— - Added to Fees
Zip Country	Zip	Zip Country		8. This corporation owes the current year	Intangible
24 25	29 30	0		Personal Property Tax.	☐ Yes ☐ No
9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	ed Agent
TURNER JAMES I			//	homas 6. Dabny R	Secretary
			ddress (P.O. Box Number is Not Acceptable) 4600 Camino Recul		
SARA80TA FL 34236		}-	33	BOO GOLLLING YCE AC	
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	_			arasota F	_ //////
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 Thurs Cham	1 - Secretary			1/5 /9	
Signature, typed or printed name of registered age 12. OFFICERS AI	ent and title if applicable. (NOTE: Ri ND DIRECTORS	egistered A	gent signature required	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE President	DELETE	1.1 TITL		ADDITIONO/DIMINOLO TO CIT IOLITO	Change Addition
NAME David L. Turner		1.2 NAN			
STREET ADDRESS 4689 Fall crest	circle	1.3 STREET ADDRESS			
CITY-ST-ZIP Sarascta . FL 34		1.4 CITY-ST-ZIP			
TITLE Secretary - Treat	Shrer DELETE	2.1 TITL			☐ Change ☐ Addition
NAME Transis Dahas		2.2 NAME		·	
NAME STREET ADDRESS 4600 Caminu	Réal	2.3 STREET ADDRESS			
city-st-zip Sarasota, & 3	34231	2. 4 C/T	Y-ST-ZIP		
TITLE	DELETE	31 TITL	E	and the same of th	Change Addition
NAME		3.2 NAM	IE		
STREET ADDRESS		3.3 STR	EET ADDRESS		j

6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

☐ DELETE

☐ DELETE

☐ DELETE

Addition

Addition

Addition

Change

Change

Change