

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000051161

1. Entity Name
BOWLES TRUCKING AND LAND CLEARING, INC.



FILED
Jan 14, 2005 08:00 AM
Secretary of State

Principal Place of Business
361 ASHLEY LANE
CENTER HILL, FL 33514

Mailing Address
361 ASHLEY LANE
CENTER HILL, FL 33514



01102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3580983

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BOWLES, BILLY G
361 ASHLEY LANE
CENTER HILL, FL 33514

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEES \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOWLES, BILLY G 361 ASHLEY LANE CENTER HILL, FL 33514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOWLES, NANCY KAY 361 ASHLEY LANE CENTER HILL, FL 33514
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01/14/05-80041-001 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nancy Bowles Nancy Bowles
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-04
Date

353
568-2131
Daytime Phone #