Principal Place of Busines	SS	Mailing Address			DEC 18	DEC 18 AM 11: 13			
HOIGROYALI NAPLES, FI	15000 BLUD 34112	4019 ROYALLA NAPLES, El	JOSO 1 3411	32UD 2	SECRETARY TALLAHASSE				
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number 65-0960540			pplied For ot Applicable	
Zip	Country	Zip	Count	try	5. Certificate of Status Desired		\$8.75 Additional Fee Required		
6. Name	Registered Agent	'		7. Name and Address of New R	egistered A	gent			
0-0505	T C Barbo	5.1		Name	.	-			
ROBERT E. BOWDOW 4019 ROYAL WOOP BLUD. NAPLES, F! 341/2				Street Address (P.O. Box Number is Not Acceptable)					
						•			
•				City	~	FL	Zip Cod	de	
3. The above named enti	ty submits this statement for	the purpose of changing it	ts registere	ed office or	registered agent, or both, in the State of Flo	orida.			
SIGNATURE	or printed name of registered agent a	and title if applicable. (NO	OTE. Registered	d Agent signatur	e required when reinstating)	DATE			
9. This corporation is elig Tax filling requirement (See criteria on back)	gible to satisfy its Intangible and elects to do so.	FILE NOW After MAY 1, 2 Make Check Paya	2000 Fée 1	will be \$5	70.00 Trust Fund Contributio			00 May Be d to Fees	
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO OFF	ICERS AND I	DIRECTOR	S IN 11	
TITLE		☐ Delete	TITLE		PRESIDENT		☐ Change	Addition	
NAME			NAME		ROBERT E. BOWDOW				
STREET ADDRESS				ET ADORESS -ST-ZIP	4019 ROYALWOOD BLUI	, .			
CITY-ST-ZIP					NAPLES, F1. 34112	ь	Channa	☐ Addition	
TITLE NAME	L Delete		TITLE		DIANALYNN BOWDOIN		☐ Change	Addition	
STREET ADDRESS				ET ADORESS	4019 ROYAL WOOD BLI		,		
CITY-ST-ZIP			CITY-	ST-ZIP	NAPLES, F1, 34112	ı U,			
TITLE		☐ Delete	· TITLE		دار المستقد بالأوماط المحارب		Change	☐ Addition	
NAME			NAME		1 0000: -12/3	3511	15.55.	1 —— = 	
STREET ADDRESS				ET ADDRESS ST-ZIP		≥1700== 150.00		*150.00	
CITY-ST-ZIP					क्कार [,]				
TITLE NAME		☐ Delete	TITLE NAME				Change	☐ Addition	
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CITY-ST-ZIP			2	-ST-ZIP					
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STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			_	ST-ZIP				■ ********	
TITLE.		ˆ ☐ Delete	. TITLE NAME				☐ Change	Addition	
NAME STREET ADDRESS				ET ADDRESS			%	100	
CITY-ST-ZIP				ST-ZIP			*	(E	
<u>-</u>					ed in Section 119.07(3)(i), Florida Statutes.				

received in a trial monitorial or supplied with this liting does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Flurther 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.

ROBERT E. BOWDOW

12-6-2000

P99000097466

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BOWDOIN IMPORTING, INC.

4019 Royal Wood Blvd. Naples, FL 34112 Phone/Fax 941-732-5452

November 9, 2000

Ms. Katherine Harris

Division of Corporations

Annual Report Reinstatement Section
P.O. Box 6327

Tallahassee, FL 32314-6327

Subject: Corporation Dissolution

Dear Katherine:

I moved north for 4 months, starting June 1, 2000. We filled out a forwarding card and received mail in Indiana. Any mail left in our box, in Florida, was mailed to us, overnight, by our business observer, Rick Slager. We did not receive the renewal notice. If we had we would have handled it. We are an active Florida corporation, with a bank account, vehicle and insurance, etc.

Please accept our check for \$150.00 to renew our corporation. Also, advise how we might handle next years renewal better. Could you send us the forms now? Any suggestion would be appreciated as is your assistance.

Sincerely,

BOWDOIN IMPORTING, INC.

Robert E. Bowdoin

President

REB/cl

cc: R. Gorden, CPA