## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P99000102114

Entity Name: DIRECTOWERS, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

619 CATTLEMAN RD. #12 3613 46TH PLAZA EAST SARASOTA, FL 34232 BRADENTON, FL 34203

Current Mailing Address: New Mailing Address:

619 CATTLEMAN RD. #12 PO BOX 5973

SARASOTA, FL 34232 SARASOTA, FL 34277

FEI Number: 65-0963179 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOWERS, BONNIE
619 CATTLEMEN RD STE 12
SARASOTA, FL 34232 US
BOWERS, BONNIE
2055 GOLDENROD STREET
SARASOTA, FL 34239 US

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: 04/30/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 BOWERS, BONNIE
 Name:
 BOWERS, BONNIE

 Address:
 619 CATTLEMEN RD STE 12
 Address:
 2055 GOLDENROD STREET

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34239

( ) Delete Title: Title: (X) Change ( ) Addition ROBERTS, GEOFFREY H Name: ROBERTS, GEOFFREY H Name: 619 CATTLEMEN RD STE 12 Address: 3613 46TH PLAZA E Address: SARASOTA, FL 34232 BRADENTON, FL 34203 City-St-Zip: City-St-Zip:

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: GEOFFREY H ROBERTS MR 04/30/2002