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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S51030

(2)

BOWLEN AND WHARTON, INC.

Principal Place of Business Mailing Address 781 SANDHILL CRANE CT. SIGN-BREVARD-AVE. ROCKLEDGE FL 32955-6301 COCOA FL 32822 3. Date Incorporated or Qualified 3a. Date of Last Report 05/06/1991 06/20/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3070407 Not Applicable Suite, Apt. #, etc \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199,032, 24 29 30 ☐ Yes ☐ No Florida Statutes). Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BOWLEN, DONALD E. 781 SANDHILL CRANE CT. 82 Street Address (P.O. Box Number is Not Acceptable) **ROCKLEDGE FL 32955** 83 84 Zip Code 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, typied or princed notice of registored agent and little if applicable (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE TOLE 1.1 TITLE ☐ Change Addition WHARTON, JOHN G., JR. NAME 1.2 NAME 781 SANDHILL CRANE CT. STREET ADDRESS 1.3 STREET ADDRESS ROCKLEDGE FL CITY - \$1 - ZIP 1.4 CITY-ST-ZIP ☐ Change TITLE DELETE Addition 21 TITLE NAME BOWLEN, DONALD E. 2.2 NAME 781 SANDHILL CRANE CT. STREET ADDRESS 2.3 STREET ADDRESS ROCKLEDGE FL 2. 4 CITY-ST-ZIP CITY-ST-7IP 1014 DELETE Addition 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE THUE 4.1 TITLE ☐ Change Addition

CITY - ST - ZIF 6.4 CITY-ST-ZIP 14. I do 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

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

NAME

TITLE

NAME

THEF

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CHY-SI-7P

CITY - \$1 - ZIP

DELETE

DELETE

407-631-9075

Change

Change

Addition

Addition

FILED

Feb 03 1997 8:00am

Secretary of State