

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V54208

FILED
Jun 24, 2009
Secretary of State

Entity Name: ROWE INVESTIGATION CO.

Current Principal Place of Business:

BOX 16341
TAMPA, FL 33687

New Principal Place of Business:

BOX 16341
TAMPA, FL 33687 US

Current Mailing Address:

BOX 16341
TAMPA, FL 33687

New Mailing Address:

BOX 16341
TAMPA, FL 33687 US

FEI Number: 59-3136664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWE, RALPH
8614 HIBISCUS DRIVE B
TAMPA, FL 33637 US

Name and Address of New Registered Agent:

ROWE, RALPH
8614 HIBISCUS DRIVE #B
TAMPA, FL 33637 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:

06/24/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROWE, RALPH
Address: BOX 16341
City-St-Zip: TAMPA, FL 33687

Title: VSD () Delete
Name: ROWE, PATRICIA A
Address: BOX 16341
City-St-Zip: TAMPA, FL 33687

Title: PTM () Delete
Name: ROWE, RALPH
Address: BOX 16341
City-St-Zip: TAMPA, FL 33687

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RALPH W. ROWE

RA

06/24/2009

Electronic Signature of Signing Officer or Director

Date