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FILED

Mar 03 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V66815

(4)

1. Corporation Name

BOWDOIN CIRCLE CORPORATION

Principal Place of Business

2033 MAIN ST  
SUITE 600  
SARASOTA FL 34237

Mailing Address

2033 MAIN ST  
SUITE 600  
SARASOTA FL 34237-6091

3. Date Incorporated or Qualified

09/22/1992

3a. Date of Last Report

02/22/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

30 Country

4. FEI Number

65-0360041

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

ICARD, MERRILL, CULLIS, TIMM, FUREN  
2033 MAIN ST  
SUITE 600  
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD  
NAME VARDON, FRANK  
STREET ADDRESS 2033 MAIN STREET, SUITE 600  
CITY-ST-ZIP SARASOTA FL  
☐ DELETETITLE V  
NAME MYERS, TROY H. JR.  
STREET ADDRESS 2033 MAIN STREET, SUITE 600  
CITY-ST-ZIP SARASOTA FL  
☐ DELETETITLE VS  
NAME HOPKINS, F. THOMAS III  
STREET ADDRESS 2033 MAIN STREET, SUITE 600  
CITY-ST-ZIP SARASOTA FL  
☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
☐ Change ☐ Addition2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ Change ☐ Addition4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Troy H. Myers, Jr.

2/24/97 (941) 953-8110

Date

Daytime Phone #

CR2E034 (9/96)