

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000093085

**Entity Name:** HENRY DOWD EA, INC.

**Current Principal Place of Business:**

3632 LAND O LAKES BLVD  
STE 106 - ROOM 12  
LAND O LAKES, FL 34639

**Current Mailing Address:**

3632 LAND O LAKES BLVD  
STE 106 ROOM 12  
LAND O LAKES, FL 34639 US

**FEI Number:** 59-3603101

**Certificate of Status Desired:** No

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

DOWD, HENRY R  
3632 LAND O LAKES BLVD  
NO 106 ROOM 12  
LAND O LAKES, FL 34639 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D,P  
Name DOWD, HENRY R  
Address 5141 EAGLE ISLAND DRIVE  
City-State-Zip: LAND O' LAKES FL 34639

Title SECRETARY, DIRECTOR  
Name DOWD, ROLAND H  
Address 5141 EAGLE ISLAND DRIVE  
City-State-Zip: LAND O LAKES FL 34639

Title DIRECTOR  
Name RACOMA, JENNIFER A  
Address 23735 HASTINGS WAY  
City-State-Zip: LAND O LAKES FL 34639

*I hereby 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 all other like empowered.*

**SIGNATURE:** HENRY R DOWD

**PRESIDENT**

**04/23/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date