2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# L05000012966

Entity Name: OWD, LLC

Current Principal Place of Business:

46 STORTH LANE, BROADMEADOWS
SOUTH NORMANTON DE55 3AA
UNITED KINGDOM, FL DE553AA UK

New Principal Place of Business:

Current Mailing Address:

46 STORTH LANE, BROADMEADOWS
SOUTH NORMANTON DE55 3AA
UNITED KINGDOM, FL DE553AA UK

New Mailing Address:

1435 E VENICE AVE #104
BOX 284
VENICE, FL 34292 US

FEI Number: 03-0554832 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART-HART, JOYCE C
9449 HOLNWON COURT
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CLARKE, ANN
Address: 46 STORTH LANE, BROADMEADOWS
City-St-Zip: SOUTH NORMANTON, U.K.,

Title: MGRM ( ) Delete
Name: CLARKE, AARON
Address: 46 STORTH LN BROADMEADOWS
City-St-Zip: SOUTH NORMANTON, UK

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANN CLARKE MGRM 02/13/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date