

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025150

FILED
Apr 07, 2009
Secretary of State

Entity Name: OWENS CONTRACTING SERVICES, INC.

Current Principal Place of Business:

15960 OLD CHENEY HWY
ORLANDO, FL 32833

New Principal Place of Business:

678505
ORLANDO, FL 32867

Current Mailing Address:

PO BOX 678505
ORLANDO, FL 32867

New Mailing Address:

FEI Number: 59-3565694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, JASON
15960 OLD CHENEY HWY.
ORLANDO, FL 32833 US

Name and Address of New Registered Agent:

OWENS, JASON
678505
ORLANDO, FL 32867 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: JASON OWENS

04/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVTS () Delete
Name: OWENS, JASON
Address: PO BOX 678505
City-St-Zip: ORLANDO, FL 32867

Title: D () Delete
Name: OWENS, JASON
Address: PO BOX 678505
City-St-Zip: ORLANDO, FL 32867

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JASON OWENS

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date