## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 451136** 

Entity Name: MCGOWAN'S INVESTMENTS, INC.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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4850 COLLINS RD. 1025 BLANDING BLVD. UNIT # 501

ORANGE PARK, FL 32073 ORANGE PARK, FL 32065

Current Mailing Address: New Mailing Address:

4850 COLLINS RD. 1025 BLANDING BLVD. UNIT # 501

ORANGE PARK, FL 32073 ORANGE PARK, FL 32065

FEI Number: 59-1544069 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MCGOWAN, WADE S.
4850 COLLINS RD.
ORANGE PARK, FL 32073 US

MCGOWAN, WADE S.
1025 BLANDING BLVD. UNIT # 501
ORANGE PARK, FL 32065 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: WADE S. MCGOWAN 01/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: MCGOWAN, WADE S Name: MCGOWAN, WADE S
Address: 4850 COLLINS RD Address: 2283 LAKESHORE DRIVE NORTH

Address: 4850 COLLINS RD Address: 2283 LAKESHORE DRIVE NORTH
City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32003

Title: S/D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KNIGHT, SUSAN S
 Name:

 Address:
 2283 LAKESHORE DRIVE NORTH
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32003
 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: SUSAN S. KNIGHT S/D 01/21/2009