2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 690468

Name:

Address:

City-St-Zip:

KITSON, LAURIE

1947 CITRONA DR, BLDG B

FENANDINA BEACH, FL 32034

OWENS VAN ETTA AND KITSON PA

FILED Jan 04, 2008 Secretary of State

Entity Na	me: OVVENS,	VANEITA	AND KITSON, P	.A.				
Current Principal Place of Business:				New Princ	New Principal Place of Business:			
1947 CITE	PROFESSION ONA DRIVE DINA BEACH, F							
Current Mailing Address:				New Mailing Address:				
1947 CITR BLDG B FERNAND	ONA DR DINA BEACH, F	FL 32034	US					
FEI Number	: 59-2097256	FEI Numb	er Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired	()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
	C.K. ONA DR, BLD DINA BEACH, F		US					
The above in the State	named entity see of Florida.	submits this	s statement for the	purpose of changing i	ts registered	office or registered agent, or	both,	
SIGNATUI								
	Electron	ic Signatur	e of Registered A	gent		Date		
Election Car	npaign Financing	g Trust Fund	Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () OWENS, C K, 1947 CITRONA FERNANDINA E			Title: Name: Address: City-St-Zip:	OWENS, C K, 1947 CITRON	X) Change()Addition IA DR, BLDG B BEACH, FL 32034		
Title: Name: Address: City-St-Zip:	VP () VANETTA, G R 1947 CITRONA FERNANDINA E			Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title [.]	SEC ()	Delete		Title [.]	() Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: C.K. OWENS PRES 01/04/2008