

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000000143

FILED
Mar 28, 2009
Secretary of State

Entity Name: OWEN FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

% EDITH OWEN
176 SOUTH COLLIER BLVD., CONDO #804
MARCO ISLAND, FL 33937

New Principal Place of Business:

Current Mailing Address:

% DAVID OWEN
5317 DIXIE HIGHWAY
LOUISVILLE, KY 40216

New Mailing Address:

FEI Number: 61-1317530 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

OWEN, EDITH E
176 S. COLLIER BLVD., CONDO #804
MARCO ISLAND, FL 33937 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

GENERAL PARTNER INFORMATION:

Document #:
Name: OWEN, EDITH E
Address: 176 S. COLLIER BLVD., CONDO #804
City-St-Zip: MARCO ISLAND, FL 33937
Document #:
Name: OWEN, DAVID
Address: 1429 SYLVAN WAY
City-St-Zip: LOUISVILLE, KY 40205

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: C. ROBERT MONTGOMERY

_____ Electronic Signature of Signing General Partner

03/28/2009

_____ Date