

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G55218

1. Entity Name
OWENS & SONS MARINE, INCORPORATED



Principal Place of Business
3601 8TH AVENUE SOUTH
ST. PETERSBURG, FL 33711

Mailing Address
3601 8TH AVENUE SOUTH
ST. PETERSBURG, FL 33711

DO NOT WRITE IN THIS SPACE

FILED
04 JAN 23 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2319039

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OWENS, ELIZABETH A.
1222 COUNTRY CLUB WAY SO.
ST. PETERSBURG, FL 33705

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OWENS, WILLIAM M. 1222 COUNTRY CLUB WAY S ST PETERSBURG, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S OWENS, JEFFERY 246 PARK CIRCLE S. ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OWENS, WILLIAM D. 1301 ASTURIA WAY S ST PETERSBURG, FL 00000,
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

100027525731
01/23/04--01061--031- **150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeffery Owens Jeffery Owens

Date

1/7/04

Daytime Phone #

(727) 323-1084