2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2008
Secretary of State

DOCUMENT# L01000006750

Entity Name: OWEN FAMILY VENTURE, L.L.C.

Current Principal Place of Business:

301 N. INTERLACHEN AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

532 S. ECON CIRCLE
SUITE 160
OVIEDO, FL 32765

Current Mailing Address:

301 N. INTERLACHEN AVENUE
WINTER PARK, FL 32789

New Mailing Address:

532 S. ECON CIRCLE
SUITE 160
OVIEDO, FL 32765

FEI Number: 59-3715817 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAW, THOMAS C
430 N. MILLS AVENUE
ORLANDO, FL 32803 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

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: TURK, MELONI E
Address: 301 N. INTERLACHEN AVENUE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: TURK, MELONI E
Address: 532 S, ECON CIRCLE, SUITE 160
City-St-Zip: OVIEDO, FL 32765

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS C. SHAW RA 01/16/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date