

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008887

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Entity Name:** OWENS REAL ESTATE HOLDINGS, LLC

**Current Principal Place of Business:**

4560 VIA ROYALE #1  
FORT MYERS, FL 33919

**New Principal Place of Business:**

1520 ROYAL PALM SQ. BLVD  
320  
FORT MYERS, FL 33919

**Current Mailing Address:**

4560 VIA ROYALE #1  
FORT MYERS, FL 33919

**New Mailing Address:**

1520 ROYAL PALM SQ. BLVD  
320  
FORT MYERS, FL 33919

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

ISLAND FINANCIAL SERVICES, INC  
4560 VIA ROYALE #1  
FORT MYERS, FL 33919    US

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

ISLAND FINANCIAL SERVICES, INC  
1520 ROYAL PALM SQ. BLVD  
320  
FORT MYERS, FL 33919 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/20/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title:            MGRM  
Name:           ISLAND FINANCIAL SERVICES, INC  
Address:        1520 ROYAL PALM SQ. BLVD. SUITE 320  
City-St-Zip:    FORT MYERS, FL 33919

I hereby 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: ISLAND FINANCIAL SERVICES, INC

MGRM

01/20/2011

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