2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019913

Entity Name: OWEN ALLEN, LLC

FILED Apr 17, 2007 Secretary of State

Current Principal Place of Business:

430 N. ORLANDO AVENUE, SUITE 100 430 N. ORLANDO AVENUE

WINTER PARK, FL 32789 SUITE 100

WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address: New Mailing Address:

430 N. ORLANDO AVENUE SUITE 100 430 N. ORLANDO AVENUE, SUITE 100 WINTER PARK, FL 32789

WINTER PARK, FL 32789

FEI Number: 45-0490478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALLEN, REBECCA D OWEN, MARIAN L 1509 SUNSET POINTE PLACE 2215 CATBRIAR WAY

OVIEDO, FL 32765 KISSIMMEE, FL 34744

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: MARIAN LOWEN 04/17/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition

OWENS, PHILLIP C OWEN, PHILLIP C Name: Name: 1509 SUNSET POINTE PL. Address: 1509 SUNSET POINTE PL. Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744

Title: MGR () Delete Title: MGR (X) Change () Addition OWENS, MARIAN L Name: OWEN, MARIAN L Name:

Address: 1509 SUNSET POINTE PL. Address: 1509 SUNSET POINTE PL. City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744

Title: MGR () Delete Title: MGR (X) Change () Addition

ALLEN, REBECCA D Name: OWEN, AMY R Name: 2512 VIRGINIA DRIVE Address: 2215 CATBRIAN WAY Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: KISSIMMEE, FL 34741

I hereby certify that the information supplied with this filing does not qualify for the 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: AMY ROWEN 04/17/2007