

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045719

Entity Name: CATHY OWENS, LLC

FILED  
Mar 11, 2007  
Secretary of State

## Current Principal Place of Business:

221 10TH STREET SE  
NAPLES, FL 341179354 US

## New Principal Place of Business:

6021 RED CARRIAGE LANE  
CHARLOTTE, NC 28212 US

## Current Mailing Address:

221 10TH STREET SE  
NAPLES, FL 341179354 US

## New Mailing Address:

6021 RED CARRIAGE LANE  
CHARLOTTE, NC 28212 US

FEI Number: 20-1262586

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAURA OLSZEWSKI & ASSOCIATES PA  
5401 TAYLOR RD  
SUITE 3  
NAPLES, FL 34109 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: MGRM ( ) Delete  
Name: OWENS, CATHY  
Address: 221 10TH STREET SE  
City-St-Zip: NAPLES, FL 341179354 US

Title: MGRM (X) Delete  
Name: OWENS, KENNETH H JR  
Address: 221 10TH STREET SE  
City-St-Zip: NAPLES, FL 341179354 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: OWENS, CATHY  
Address: 6021 RED CARRIAGE LANE  
City-St-Zip: CHARLOTTE, NC 28212 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CATHY OWENS

MGRM

03/11/2007

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