


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000090186 1. Entity Name OWEN G. GARDNER, LLC	
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Principal Place of Business 1901 FORBES ROAD ST AUGUSTINE, FL 32092	Mailing Address 1901 FORBES ROAD ST AUGUSTINE, FL 32092
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DO NOT WRITE IN THIS SPACE



02092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 56-2506373	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

EHRENREICH, SHARON W
303 STATE ROAD 26
MELROSE, FL 32666

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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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GARDNER, OWEN G 1901 FORBES ROAD ST AUGUSTINE, FL 32092
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Owen G. Gardner* **OWEN G. GARDNER 2-2-07 904-826-4464**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #