

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000020678

Entity Name: OWEN AVENUE, LLC

FILED  
Apr 07, 2009  
Secretary of State

**Current Principal Place of Business:**

6201 LEE ANN LANE, SUITE 102  
NAPLES, FL 34109

**New Principal Place of Business:**

6201 LEE ANN LANE  
NAPLES, FL 34109

**Current Mailing Address:**

6201 LEE ANN LANE, SUITE 102  
NAPLES, FL 34109

**New Mailing Address:**

6201 LEE ANN LANE  
NAPLES, FL 34109

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

HL STATUTORY AGENT, INC.  
800 LAUREL OAK DRIVE, SUITE 600  
NAPLES, FL 34108 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: BOWMAN, JOHN H  
Address: 6201 LEE ANN LANE, SUITE 102  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BOWMAN, JOHN H  
Address: 6201 LEE ANN LANE  
City-St-Zip: NAPLES, FL 34109

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: JOHN BOWMAN

MGR

04/07/2009

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