

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000127136

Entity Name: GARY OWENS & SONS, INC.

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

201 NAYLOR DRIVE
WEST MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

201 NAYLOR DRIVE
WEST MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 51-0489059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, GARRELL P
201 NAYLOR DRIVE
WEST MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A
BOX 1379410
DELTONA, FL 32725 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: OWENS, GARRELL P

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OWENS, GARRELL P
Address: 201 NAYLOR DRIVE
City-St-Zip: WEST MELBOURNE, FL 32904

Title: VP () Delete
Name: OWENS, ROBERT VP
Address: 201 NAYLOR DRIVE
City-St-Zip: WEST MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OWENS, GARRELL P

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date