

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000150172
 1. Entry Name
 HOWARD OWENS CONSTRUCTION, INC



Principal Place of Business Mailing Address
 1672 HWY 173 1672 HWY 173
 GRACEVILLE, FL 32440 GRACEVILLE, FL 32440



04082005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0481242	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

OWENS, HOWARD
 1672 HWY 173
 GRACEVILLE, FL 32440

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8. The above named entry 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 qualifications of registered agent.

SIGNATURE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	OWENS, HOWARD
STREET ADDRESS	1672 HWY 173
CITY ST ZIP	GRACEVILLE, FL 32440
TITLE	SEC
NAME	OWENS, SHIRLEY
STREET ADDRESS	1672 HWY 173
CITY ST ZIP	GRACEVILLE, FL 32440
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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 04/13/05-80007-022 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c) Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with a trustee empowered.

SIGNATURE: *Shirley Owens* 4/11/05 850-547-4456
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR