

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 30, 2007
Secretary of State**

DOCUMENT# P03000150172

Entity Name: HOWARD OWENS CONSTRUCTION, INC

Current Principal Place of Business:

1672 HWY 173
GRACEVILLE, FL 32440

New Principal Place of Business:

Current Mailing Address:

1672 HWY 173
GRACEVILLE, FL 32440

New Mailing Address:

FEI Number: 20-0481242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, HOWARD
1672 HWY 173
GRACEVILLE, FL 32440 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OWENS, HOWARD
Address: 1672 HWY 173
City-St-Zip: GRACEVILLE,, FL 32440

Title: SEC () Delete
Name: OWENS, SHIRLEY
Address: 1672 HWY 173
City-St-Zip: GRACEVILLE, FL 32440

Title: V () Delete
Name: OWENS, CHRISTOPHER
Address: 1980 BETHLEHEM CHURCH RD
City-St-Zip: BONIFAY, FL 32425

Title: V (X) Delete
Name: HARKER, ROBERT
Address: 1147 HWY 179A
City-St-Zip: WESTVILLE, FL 32464

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: HOWARD OWENS

P

07/30/2007

Electronic Signature of Signing Officer or Director

_____ Date