2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150172

Entity Name: HOWARD OWENS CONSTRUCTION, INC

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1672 HW` GRACEVI	Y 173 ILLE, FL 32440				
Current Mailing Address:			New Mailing Address:		
1672 HW` GRACEVI	Y 173 ILLE, FL 32440				
FEI Number	r: 20-0481242	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
1672 HW	HOWARD Y 173 ILLE, FL 32440	US			
	e named entity s te of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	IRE:				
Electronic Signature of Registered Age			ent	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () OWENS, HOW 1672 HWY 173 GRACEVILLE,,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () OWENS, SHIRI 1672 HWY 173 GRACEVILLE, I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	OWENS, CHRIS	Delete STOPHER IEM CHURCH RD	Title: Name: Address:	() Change () Addition	

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: SHIRLEY OWENS SEC 04/06/2009