

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000035854

Entity Name: OWEN INSURANCE, INC.

FILED
Jan 09, 2006
Secretary of State

Current Principal Place of Business:

9123 N. MILITARY TRAIL
SUITE 106
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

9123 N. MILITARY TRAIL
SUITE 106
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 05-0618537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OWEN, JON P
9123 N. MILITARY TRAIL
SUITE 106
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

OWEN, JON P
9123 NORTH MILITARY TRAIL
SUITE 106
PALM BEACH GARDENS, FL 33410 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:

01/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OWEN, JON P
Address: 11654 HACKBEERY ST.
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: OWEN, LISA C
Address: 11654 HACKBEERY ST.
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: OWEN, VALERIE L
Address: 11654 HACKBEERY ST.
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OWEN, JON P
Address: 15385 87TH TRAIL NORTH
City-St-Zip: WEST PALM BEACH, FL 33418

Title: D (X) Change () Addition
Name: OWEN, LISA C
Address: 15385 87TH TRAIL NORTH
City-St-Zip: WEST PALM BEACH, FL 33418

Title: D (X) Change () Addition
Name: OWEN, VALERIE L
Address: 243 CASTLWOOD #6
City-St-Zip: LAKE PARK, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA OWEN

SEC

01/09/2006

Electronic Signature of Signing Officer or Director

Date