

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007 08:00 A
Secretary of State

DOCUMENT # P05000163960

1. Entity Name
MOODY OWENS, INC.



Principal Place of Business
4011 DORADO DRIVE
WEST PALM BEACH, FL 33418

Mailing Address
4011 DORADO DRIVE
WEST PALM BEACH, FL 33418



01032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
55-0911447

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

OWENS, DAVID M JR
4011 DORADO DRIVE
WEST PALM BEACH, FL 33418

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Linda Owens

(NOTE: Registered Agent signature required when reinstating)

3-5-07

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME OWENS, DAVID M JR
STREET ADDRESS 4011 DORADO DRIVE
CITY-ST-ZIP WEST PALM BEACH, FL 33418

TITLE VP
NAME OWENS, LINDA
STREET ADDRESS 4011 DORADO DR
CITY-ST-ZIP WEST PALM BEACH, FL 33418

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE: Linda Owens Linda Owens

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-07 561-691-1410

Date

Daytime Phone #