

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000012715

**FILED**  
**Jan 15, 2010**  
**Secretary of State**

**Entity Name:** BOWEN CONSULTING GROUP, INC.

**Current Principal Place of Business:**

233 EAST BAY STREET  
SUITE #901  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1656  
PONTE VEDRA BEACH, FL 32004

**New Mailing Address:**

**FEI Number:** 20-8334263

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HORNE, WILLIAM E LAWYER  
233 EAST BAY STREET  
SUITE #901  
JACKSONVILLE, FL 32202 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PVST  
**Name:** BOWEN, ROBERT  
**Address:** 233 EAST BAY STREET SUITE #901  
**City-St-Zip:** JACKSONVILLE, FL 32202

**Title:** D  
**Name:** BOWEN, ROBERT  
**Address:** 233 EAST BAY STREET SUITE #901  
**City-St-Zip:** JACKSONVILLE, FL 32202

I hereby 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 all other like empowered.

**SIGNATURE:** ROBERT BOWEN

PRES

01/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date