

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000034080

Entity Name: CHRISTINE BOWEN, INC.

FILED  
Apr 22, 2008  
Secretary of State

## Current Principal Place of Business:

5514 KNIGHT AVE.  
SEBRING, FL 33875

## New Principal Place of Business:

4533 SELAH ROAD  
SEBRING, FL 33875 US

## Current Mailing Address:

5514 KNIGHT AVE.  
SEBRING, FL 33875

## New Mailing Address:

4533 SELAH ROAD  
SEBRING, FL 33875 US

FEI Number: 20-8642819

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANCOCK, JANE M  
551 S. COMMERCE AVE.  
SEBRING, FL 33870 US

## Name and Address of New Registered Agent:

HANCOCK, JANE M  
551 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870 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: JANE M HANCOCK

04/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KNIGHT, CHRISTINE M  
Address: 5514 KNIGHT AVE.  
City-St-Zip: SEBRING, FL 33875

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BOWEN, CHRISTINE M  
Address: 4533 SELAH ROAD  
City-St-Zip: SEBRING, FL 33875 US

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: CHRISTINE BOWEN

PD

04/22/2008

Electronic Signature of Signing Officer or Director

Date