

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000134876

FILED
Apr 22, 2009
Secretary of State

Entity Name: OWENS AND ASSOCIATES MARKETING INC.

Current Principal Place of Business:

2805 VERONIA DR SUITE 204
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

8610 ISLEWORTH CT
304
RALEIGH, NC 27617

Current Mailing Address:

2805 VERONIA DR SUITE 204
PALM BEACH GARDENS, FL 33410

New Mailing Address:

8610 ISLEWORTH CT
304
RALEIGH, NC 27617

FEI Number: 83-0503035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, JOSEPH
2805 VERONIA DR SUITE 204
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

LIPSCHER, GENE
824 W. INDIANTOWN RD.
102
JUPITER, FL 33458 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: GENE LIPSCHER

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OWENS, JOSEPH
Address: 2805 VERONIA DR SUITE 204
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P () Delete
Name: OWENS, JOSEPH
Address: 2805 VERONIA DR SUITE 204
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OWENS, JOSEPH
Address: 8610 ISLEWORTH CT 304
City-St-Zip: RALEIGH, NC 27617

Title: P (X) Change () Addition
Name: OWENS, JOSEPH
Address: 8610 ISLEWORTH CT 304
City-St-Zip: RALEIGH, NC 27617

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: JOSEPH OWENS

MR

04/22/2009

Electronic Signature of Signing Officer or Director

Date