

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000010286

Entity Name: OWNED BY GOD, INC.

FILED
Apr 04, 2009
Secretary of State

Current Principal Place of Business:

13030 THONOTOSASSA RD
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

13030 THONOTOSASSA RD
DOVER, FL 33527

New Mailing Address:

FEI Number: 26-1868054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, CHRISTINE
2807 LOCICERO DR.
TAMPA, FL 33619 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: P,B () Delete
Name: DOLLINS,, PATSY A
Address: 13030 THONOTOSASSA RD
City-St-Zip: DOVER, FL 33527 US

Title: T,B () Delete
Name: KEEN, WILLIAM
Address: 4002 CORD RD
City-St-Zip: PLANT CITY, FL 33565 US

Title: VP,S () Delete
Name: SMITH, CHRISTINE
Address: 2807 LOCICERO DR
City-St-Zip: TAMPA, FL 33619 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP,S (X) Change () Addition
Name: KEEN, WILLIAM
Address: 4002 CORD RD
City-St-Zip: PLANT CITY, FL 33565 US

Title: TR,S (X) Change () Addition
Name: SMITH, CHRISTINE
Address: 2807 LOCICERO DR
City-St-Zip: TAMPA, FL 33619 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: PATSY A. DOLLINS

P.B.

04/04/2009

Electronic Signature of Signing Officer or Director

Date