## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030896

Entity Name: THE C. OWENS GROUP, LLC

**Current Principal Place of Business:** 

2436 PINE CHASE CIRCLE SAINT CLOUD, FL 34769

**Current Mailing Address:** 

P. O. BOX 702037

SAINT CLOUD. FL 34770 US

FEI Number: 26-2268641 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OWENS, CHRISTOPHER GSR. 2436 PINE CHASE CIRCLE SAINT CLOUD, FL 34769 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:

Electronic Signature of Registered Agent

Date

FILED Apr 22, 2015

**Secretary of State** 

CC3532242688

## Authorized Person(s) Detail:

Title MGR

Name OWENS, CHRISTOPHER GSR.

Address 2436 PINE CHASE CIRCLE

City-State-Zip: SAINT CLOUD FL 34769

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER OWENS

MGR

04/22/2015