## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 853174**

Entity Name: COGUN, INC.

FILED Jan 25, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
11369 MARKET STREET NORTH LIMA, OH 44452						
Current Mailing Address:			New Mailing Address:			
COGUN INDUSTRIES INC. PO BOX 704 NORTH LIMA, OH 44452				COGUN INC. PO BOX 704 NORTH LIMA, OH 44452		
FEI Number:	El Number: 34-1056830 FEI Number Applied For ( ) FEI Nu		FEI Nun	nber Not Applicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition
Title: Name: Address: City-St-Zip:	PD () E COUCHNENOUR 330 TERRA VERI COLUMBIANNA,	DE		Title: Name: Address: City-St-Zip:	. ,	
Title: Name: Address: City-St-Zip:	SD () E COUCHENOUR, S 12105 GREEN BI SALEM, OH 4444	EAVER RD		Title: Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	COUCHENOUR, A	Delete JAMES R DIRECT. /E. EXT. HIO, OH 44408 US		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition
Title: Name: Address: City-St-Zip:	SCOTT, PETÈR F 3951 LINDA WAY			Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () E COUCHENOUR, A 13430 SOUTH AN COLUMBIANA, O	/E. EXT.		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT A. COUCHENOUR SECT 01/25/2007