

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 851376

FILED  
Feb 18, 2002 8:00 AM  
Secretary of State

Entity Name: HOGGATT POTTERY, INC.

## Current Principal Place of Business:

1544 PERIWINKLE WAY  
SANIBEL ISLAND, FL 33957

## New Principal Place of Business:

## Current Mailing Address:

1544 PERIWINKLE WAY  
SANIBEL ISLAND, FL 33957

## New Mailing Address:

FEI Number: 35-1512852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOGGATT, DAVID L  
1544 PERIWINKLE WAY  
SANIBEL, FL 33957

## 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HOGGATT, DAVID L,  
Address: 1544 PERIWINKLE WAY  
City-St-Zip: SANIBEL, FL

Title: STD ( ) Delete  
Name: HOGGATT, BARBARA A,  
Address: 1544 PERIWINKLE WAY  
City-St-Zip: SANIBEL, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HOGGATT, DAVID L,  
Address: 1544 PERIWINKLE WAY  
City-St-Zip: SANIBEL, FL 33957 US

Title: STD (X) Change ( ) Addition  
Name: HOGGATT, BARBARA A,  
Address: 1544 PERIWINKLE WAY  
City-St-Zip: SANIBEL, FL 33957 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA A. HOGGATT

STD

02/18/2002

Electronic Signature of Signing Officer or Director

Date