

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # F49766

1. Entity Name  
ROHAN ENTERPRISES, INC.



Principal Place of Business

1531 CHATEAUWOOD DR  
CLEARWATER, FL 33764 US

Mailing Address

1531 CHATEAUWOOD DR  
CLEARWATER, FL 33764 US

**FILED**  
**Apr 20, 2005 08:00 AM**  
**Secretary of State**



04122005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2140545	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HANSEN, ROLAND M  
1531 CHATEAUWOOD DR  
CLEARWATER, FL 33764

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HANSEN, ROLAND M JR.
STREET ADDRESS	1531 CHATEAU WOOD DRIVE
CITY-ST-ZIP	CLEARWATER, FL
TITLE	ST
NAME	HANSEN, MARY JOAN A
STREET ADDRESS	1531 CHATEAU WOOD DRIVE
CITY-ST-ZIP	CLEARWATER, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Roland M Hansen*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-05

Date

727 531-3673

Daytime Phone #