

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 18, 2007 08:00 AM
Secretary of State**

DOCUMENT # H17366

1. Entity Name
4141, INC.



Principal Place of Business

5100 87TH ST. E.
BRADENTON, FL 34211 US

Mailing Address

5100 87TH ST. E.
BRADENTON, FL 34211 US



03212007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2439540

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HOGAN, PATRICK
5100 87TH ST. E.
BRADENTON, FL 34211

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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 reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HUNT, ROBERT
STREET ADDRESS	5100 87TH ST. E.
CITY-ST-ZIP	BRADENTON, FL 34211
TITLE	VST
NAME	HOGAN, PATRICK
STREET ADDRESS	5100 87TH ST. E.
CITY-ST-ZIP	BRADENTON, FL 34211
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/27/07-80041-008 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/07 (941) 758-2424

Date

Daytime Phone #