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FILED

May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H58352

(6)

1. Corporation Name

HORACE D. BOGUES, INC.

Principal Place of Business

14555 SE 53RD CT
~~8EE-04~~
SUMMERFIELD FL 34491
US

Mailing Address

5553 HAVERFORD WAY
SUITE B
LAKE WORTH FL 33463-6644
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22 NO SUITE NUMBER

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BOGUES, HORACE D.
14555 S.E. 53RD COURT
SUMMERFIELD FL 32891

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5143 S.W. 93rd Avenue

83

84 City

Cooper City

FL

85

Zip Code
33328

3. Date Incorporated or Qualified

05/20/1985

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2651155

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
BOGUES, HORACE D.
STREET ADDRESS
14555 S.E. 53RD COURT
CITY-ST-ZIP
SUMMERFIELD FL

TITLE ☐ DELETE

NAME
BOGUES, STELLA
STREET ADDRESS
14555 S.E. 53RD COURT
CITY-ST-ZIP
SUMMERFIELD FL

TITLE ☐ DELETE

NAME
BOGUES, ANDREE.
STREET ADDRESS
5553 HAVERFORD WAY.
CITY-ST-ZIP
LAKE WORTH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

☒ Change ☐ Addition

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14. I do 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 annual report or supplemental annual 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 incorporator or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

STELLA BOGUES

12/10/1997

11/9/97

CR2E034 (9/96)