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May 04, 1999 8:00 am
Secretary of State

05-04-1999 90080 001 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J26785

1. Corporation Name

THE HOGAN GROUP, INC.

Principal Place of Business

101 E. KENNEDY BLVD., #4000
TAMPA FL 33602

Mailing Address

101 E. KENNEDY BLVD., #4000
TAMPA FL 33602

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1986

4. FEI Number

59-2717917

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

LUBRANO, ANDREW J.
101 E. KENNEDY BLVD., #4000 3700
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

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

101 E. Kennedy Blvd #3700

83

84

City

Tampa FL

FL

85 Zip Code

33602

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 PSTD
NAME HOGAN, MICHAEL D.
STREET ADDRESS 101 E. KENNEDY BLVD., #4000
CITY-ST-ZIP TAMPA FL 33602

☐ DELETE

TITLE V
NAME MILLS, RAY
STREET ADDRESS 101 E. KENNEDY BLVD., #4000
CITY-ST-ZIP TAMPA FL 33602

☐ DELETE

TITLE S
NAME PEARSON, RITA
STREET ADDRESS 101 E. KENNEDY BLVD., #4000
CITY-ST-ZIP TAMPA FL 33602

☒ DELETE

TITLE VP
NAME NEVE, RICHARD H
STREET ADDRESS 5200 BLUE LAGOON DR, STE 400
CITY-ST-ZIP MIAMI FL 33126

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE Vice President & Secretary
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☒ Change

☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE Vice President
5.2 NAME Robin Y. Bishop
5.3 STREET ADDRESS 101 E. Kennedy Blvd. #4000
5.4 CITY-ST-ZIP Tampa FL 33602

☐ Change

☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 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 receiver 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/99

813/274-8000

Date

Daytime Phone #

CR2E034 (11/98)