

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J94622

FILED  
Feb 19, 2008  
Secretary of State

Entity Name: ROGGEN ENTERPRISES OF POLK COUNTY, INC.

**Current Principal Place of Business:**

2840 SECURITY LANE  
LAKELAND, FL 33803 US

**New Principal Place of Business:**

34 LAKE ARROWHEAD DRIVE  
WINTER HAVEN, FL 33880 US

**Current Mailing Address:**

2840 SECURITY LANE  
LAKELAND, FL 33803 US

**New Mailing Address:**

34 LAKE ARROWHEAD DRIVE  
WINTER HAVEN, FL 33880 US

FEI Number: 65-0005286

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ROGGEN, KEVIN R  
2840 SECURITY LANE  
LAKELAND, FL 33803 US

**Name and Address of New Registered Agent:**

ROGGEN, KEVIN R  
34 LAKE ARROWHEAD DRIVE  
WINTER HAVEN, FL 33880 US

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: \_\_\_\_\_

02/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ROGGEN, KEVIN R  
Address: 2840 SECURITY LANE  
City-St-Zip: LAKELAND, FL 33803

Title: ST ( ) Delete  
Name: ROGGEN, DEBRA C  
Address: 2840 SECURITY LANE  
City-St-Zip: LAKELAND, FL 33803

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ROGGEN, KEVIN R  
Address: 34 LAKE ARROWHEAD DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: ST (X) Change ( ) Addition  
Name: ROGGEN, DEBRA C  
Address: 34 LAKE ARROWHEAD DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DEBRA C ROGGEN

ST

02/19/2008

Electronic Signature of Signing Officer or Director

Date