


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000063437 1. Entity Name ROGER ENTERPRISES, INC.	
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Principal Place of Business 7110 S KIRKMAN ROAD ORLANDO, FL 32837	Mailing Address 11215 CRYSTAL GLEN BLVD. ORLANDO, FL 32837
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DO NOT WRITE IN THIS SPACE

03212008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3656369	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

WARRIS, STEPHEN
11215 CYRSTAL GLEN BLVD
ORLANDO, FL 32837

**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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____

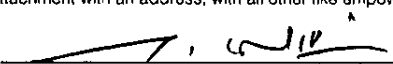
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000877406 04/14/08-80013-008 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PT WARRIS, STEPHEN 11215 CRYSTAL GLEN BLVD ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VS WARRIS, ANITA 11215 CRYSTAL GLEN BLVD ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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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:  **3/29/08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #