

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000025031

FILED
Mar 30, 2004
Secretary of State

Entity Name: HOGLUND ART, INC.

Current Principal Place of Business:

5415 NW 50TH CT.
COCONUT CREEK, FL 33073

New Principal Place of Business:

3791 13TH AVENUE SW
NAPLES, FL 34117 US

Current Mailing Address:

5415 NW 50TH CT.
COCONUT CREEK, FL 33073

New Mailing Address:

3791 13TH AVENUE SW
NAPLES, FL 34117 US

FEI Number: 65-1088199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOGLUND, CHARLENE
5415 NW 50TH CT.
COCONUT CREEK, FL 33073

Name and Address of New Registered Agent:

HOGLUND, CHARLENE
3791 13TH AVENUE SW
NAPLES, FL 34117

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: _____

03/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOGLUND, ROBERT J
Address: 5415 NW 50TH CT.
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD () Delete
Name: HOGLUND, CHARLENE M
Address: 5415 NW 50TH CT.
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOGLUND, ROBERT J
Address: 3791 13TH AVENUE SW
City-St-Zip: NAPLES, FL 34117

Title: SD (X) Change () Addition
Name: HOGLUND, CHARLENE M
Address: 3791 13TH AVENUE SW
City-St-Zip: NAPLES, FL 34117

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLENE M HOGLUND

SD

03/30/2004

Electronic Signature of Signing Officer or Director

Date