2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000109768

Entity Name: T.V.A. HOGAN ENTERPRISES, INC.

FILED May 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

27171 SUN AQUA LANE 5860 GOLDEN OAKS LANE

BONITA SPRINGS, FL 34135 NAPLES, FL 34119

Current Mailing Address: New Mailing Address:

27171 SUN AQUA LANE 5860 GOLDEN OAKS LANE

BONITA SPRINGS, FL 34135 NAPLES, FL 34119

FEI Number: 30-0216909 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KING, KENNETH G ESQ.
720 ORCHID DRIVE
NAPLES, FL 34102 US
HOGAN, TODD D
5860 GOLDEN OAKS LANE
NAPLES, FL 34119 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: TODD D. HOGAN 05/17/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition Name: HOGAN, TODD D Name: HOGAN, TODD D

 Address:
 27171 SUN AQUA LANE
 Address:
 5860 GOLDEN OAKS LANE

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 NAPLES, FL 34119

Title: SVD () Delete Title: SVD (X) Change () Addition

Name: HOGAN, VERA J Name: HOGAN, VERA J
Address: 27171 SUN AQUA LANE Address: 5860 GOLDEN OAKS LAN

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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: TODD D. HOGAN PTD 05/17/2005