2008 FOR PROFIT CORPORATION

Jan 14, 2008 8:00 am **ANNUAL REPORT** Secretary of State **DOCUMENT # P04000146796** 01-14-2008 90097 047 ***150.00 1. Entity Name BOGEY'S HOME REPAIR, INC. Principal Place of Business Mailing Address 3116 BAYSHORE GARDENS PARKWAY 3116 BAYSHORE GARDENS PARKWAY BRADENTON, FL 34207 BRADENTON, FL 34207 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt # etc. Suite Apt #, etc 01092008 Chg-P CR2E034 (12/06) City & State City & State Applied For 4. FEI Number 84-1660291 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VAUGHAN, GEORGE D III Street Address (P.O. Box Number is Not Acceptable) 3116 BAYSHORE GARDENS PARKWAY BRADENTON, FL 34207 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Addition VAUGHAN, GEORGE D III NAME NAME 3116 BAYSHORE GARDENS PARKWAY STREET ADORESS STREET ADDRESS BRADENTON, FL 34207 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Change TITLE Addition VAUGHAN, JESSICA R NAME NAME STREET ADDRESS 3116 BAYSHORE GARDENS PARKWAY STREET ADORESS CITY-ST-ZIP BRADENTON, FL 34207 CITY-ST-ZIF TITLE. ☐ Delete TITLE SECRETARY ☐ Change Addition NAME NAME PHILLIP A. CLARK STREET ADDRESS STREET ADDRESS 3114 BAYSHORE GARDENS PARKWAY CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 34207 ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS

TITLE

NAME

☐ Delete

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Jessica Vaughan GNING OFFICER OR DIRECTOR

FILED

Addition

☐ Change