2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000088213

Entity Name: HAGEN CONSTRUCTION, INC.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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950 S. WINTER PARK DRIVE 130 REMINGTON DRIVE

SUITE 350 SUITE 1012

CASSELBERRY, FL 32707 OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

950 S. WINTER PARK DRIVE 130 REMINGTON DRIVE SUITE 350 SUITE 1012

CASSELBERRY, FL 32707 SOITE 1012 OVIEDO, FL 32765

FEI Number: 20-5127081 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:

KAPLAN, JEFFREY L
950 S. WINTER PARK DRIVE
SUITE 350-B
CASSELBERRY, FL 32707 US
HAGEN, DEBORAH D
130 REMINGTON DRIVE
SUITE 1012
OVIEDO, FL 32765 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: DEBORAH D. HAGEN 03/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: HAGEN, ERIC L Name: HAGEN, TERRY D

Address: 950 S. WINTER PARK DRIVE, SUITE 350 Address: 130 REMINGTON DRIVE - SUITE 1012

City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: OVIEDO, FL 32765

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

Name: HAGEN, JEFFREY Name: HAGEN, DEBORAH

Address: 950 S. WINTER PARK DRIVE, SUITE 350 Address: 130 REMINGTON DRIVE - SUITE 1012

City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: OVIEDO, FL 32765

Title: SD (X) Delete Title: () Change () Addition Name: HAGEN, TERRY D Name:

Address: 950 S. WINTER PARK DRIVE, SUITE 350 Address:
City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip:

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

 Name:
 HAGEN, DEBORAH D
 Name:

 Address:
 950 S. WINTER PARK DRIVE, SUITE 350
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707
 City-St-Zip:

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: DEBORAH D. HAGEN VPD 03/16/2009