

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000083328

Entity Name: NAGOH, INC

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

440 CAPRI BLVD  
TREASURE ISLAND, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

440 CAPRI BLVD  
TREASURE ISLAND, FL 33706

**New Mailing Address:**

FEI Number: 27-3662544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOGAN, WILLIAM H  
440 CAPRI BLVD  
TREASURE ISLAND, FL 33706 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HOGAN, WILLIAM H  
Address: 440 CAPRI BLVD  
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: CFO  
Name: HOGAN, KAREN S  
Address: 440 CAPRI BLVD  
City-St-Zip: TREASURE ISLAND, FL 33706 US

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM H. HOGAN

PRES

01/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date