

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P93000019565 1. Entity Name ROGERS P & L ENTERPRISES, INC.					
Principal Place of Business 3090 CHARLES AVENUE CLEARWATER, FL 33761 US			Mailing Address 3090 CHARLES AVE CLEARWATER, FL 33761 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3171145	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent ROGERS, LINDA A 3090 CHARLES AVE CLEARWATER, FL 33761				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				08/23/06--01034--025 **\$61.25	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$61.25			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROGERS, PHILIP 3418 TANGLEWOOD TERRACE PALM HARBOR, FL 34685		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Anderson, Bonnie Jo 5417 Leeward Lane New Port Richey, FL 34652	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROGERS, LINDA 3418 TANGLEWOOD TERRACE PALM HARBOR, FL 34685		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Malloy, Timothy J 2430 Indian Tr E Palm Harbor, FL 34683	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HUPP, ROBERT 1754 ARABIAN LANE PALM HARBOR, FL 34685		TITLE NAME STREET ADDRESS CITY-ST-ZIP	1191 Taylor Dr Dunedin, FL 34698	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIEG, WALTER R JR 275 COUNTY ROAD 94 PALM HARBOR, FL 34683		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Fuller, Kerry 530 S Gulfview Blvd Unit 504 Clearwater, FL 33767	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COHEN, MARILYN 1155 CLAYS TRAIL OLDSMAR, FL 34677		TITLE NAME STREET ADDRESS CITY-ST-ZIP	1792 Lago Vista Blvd Palm Harbor, FL 34685	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ANDERSON, WALTER T 5417 LEEWARD LN NEW PORT RICHEY, FL 34652		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Queen, Jeffrey 6041 Japonica Ct New Port Richey, FL 34655	
12. I hereby certify that the information supplied with this filing 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.					
SIGNATURE: _____ 8/17/06 127 726-3333 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

FILED
 2006 AUG 21 AM 8:57
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

