

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 16, 2001 8:00 am
Secretary of State

05-16-2001 90377 012 ***150.00

DOCUMENT # P930000 81077

1. Entity Name *Bogue Executive Enterprises, INC.*

Principal Place of Business *1501 53rd St West
West Palm Beach,
FL 33407*

Mailing Address *4280 Pearl Harbor Drive
Naples, FL 34112*

2. Principal Place of Business

3. Mailing Address *11380 Prosperity Farms Rd.*

Suite, Apt. #, etc. *114.*

City & State *Palm Beach Gardens, FL*

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Zip *33410* Country *Palm Beach*

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4. FEI Number *650454025*

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

*Julianne Frank
11380 Prosperity Farms Rd.
Suite 114
Palm Beach Gardens, FL 33410*

7. Name and Address of New Registered Agent

Name *Julianne Frank*

Street Address (P.O. Box Number is Not Acceptable) *11380 Prosperity Farms Rd.*

Suite *114*

City *Palm Beach Gardens* FL Zip Code *33410*

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President Carrie A Bogue 4280 Pearl Harbor Drive Naples, FL 34112</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Secretary Carrie A. Bogue 4280 Pearl Harbor Drive Naples, FL 34112</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Treasurer Carrie A. Bogue 4280 Pearl Harbor Drive Naples, FL 34112</i>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carrie A. Bogue* *Carrie A. Bogue President 4/26/01*

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date Daytime Phone #

941-435-0002

CR2E034 (11/00)