2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000053693

FILED Apr 30, 2005 Secretary of State

Entity Name: STEVE HOGAN ENTERPRISES, INC. **Current Principal Place of Business: New Principal Place of Business:** 5556 ISLANDWALK CIRCLE NAPLES, FL 34119 **Current Mailing Address: New Mailing Address:** 5556 ISLANDWALK CIRCLE NAPLES, FL 34119 FEI Number: 65-0514787 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: WOOD, DOUGLAS A 1000 N TAMIAMI TRL, 201 NAPLES, FL 33940 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HOGAN, STEVE HOGAN, STEVE T Name: Name: 5556 ISLANDWALK CIRCLE 5556 ISLANDWALK CIRCLE Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119

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

HOGAN, LISA Name: HOGAN, LISA S

Name: 5556 ISLANDWALK CIRCLE Address: 5556 ISLANDWALK CIRCLE Address: NAPLES, FL 34119 NAPLES, FL 34119 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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: LISA S. HOGAN 04/30/2005 D