


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000021044 1. Entity Name ROGAN ENTERPRISES, INC.	
--	---

Principal Place of Business 2325 GORDON DRIVE NAPLES, FL 33940	Mailing Address 2325 GORDON DRIVE NAPLES, FL 33940
--	--

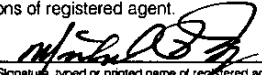
DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROGAN, MICHAEL P
2325 GORDON DRIVE
NAPLES, FL 33940

DO NOT WRITE
IN THIS SPACE

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.

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

DATE: 4-21-06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

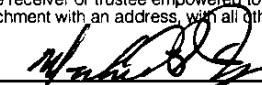
9. Election Campaign Financing
Trust Fund Contribution. ☒ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROGAN, MICHAEL P 2325 GORDON DRIVE NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

600074151896
05/08/06--01018--001 **163.75

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

DATE: 4-21-06 DAYTIME PHONE #

FILED
06 APR 27 AM 11:37
CLERK OF THE STATE
TALLAHASSEE, FLORIDA



04172006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0656780	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required