1/20/00-90162-016-$150.00-$150.00

01-20-2000 90162 016 ***150.00

FILED
00 JUL 31 AM 9:34
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000087378

1. Entity Name:

BOGAN CONSTRUCTION INC.

Principal Place of Business	Mailing Address
37331 OAKLAND EUSTIS FL 32784	39 TOWN HILL DRIVE EUSTIS FL 32726-5009

2. Principal Place of Business	3. Mailing Address
37331 OAKLane	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: UmatillA FL.	City & State
Zip: 32784 Country: LAKE	Zip / Country

4. FEI Number: 59-3472507 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

BOGAN, HENRY
39 TOWN HILL DRIVE
EUSTIS FL 32726

7. Name and Address of New Registered Agent

Name: Henry BOGAN
Street Address (P.O. Box Number is Not Acceptable) Changed ↓
37331 OAK LANE
City: UMATILLA FL Zip Code: 32784

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 ________ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)) DATE 1/10/00

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, 2000 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BOGAN, HENRY PO BOX 441 EUSTIS FL 32727-0441	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BOGAN Henry 37331 Umatilla FL 32784	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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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: Henry BOGAN (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 1/10/00 (Date) 1-352-483-1561 (Daytime Phone #)