

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000102096

FILED
Mar 11, 2009
Secretary of State

Entity Name: OGDEN'S INCORPORATED

Current Principal Place of Business:

1315 WHEELER ROAD
APOPKA, FL 327037410

New Principal Place of Business:

Current Mailing Address:

1315 WHEELER ROAD
APOPKA, FL 327037410

New Mailing Address:

FEI Number: 59-3608819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OGDEN, STEPHEN R
1315 WHEELER ROAD
APOPKA, FL 327037410 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: OGDEN, STEPHEN R
Address: 1315 WHEELER ROAD
City-St-Zip: APOPKA, FL 327037410

Title: STD () Delete
Name: OGDEN, REBECCA S
Address: 1315 WHEELER ROAD
City-St-Zip: APOPKA, FL 327037410

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: LARSSON, SHARLA R
Address: 8741 SW 19TH AVE RD
City-St-Zip: OCALA, FL 34476

Title: T () Change (X) Addition
Name: LARSSON, ERIK L
Address: 8741 SW 19TH AVE RD
City-St-Zip: OCALA, FL 34476

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ERIK LARSSON

T

03/11/2009

Electronic Signature of Signing Officer or Director

Date