

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000019565

**Entity Name:** ROGERS P & L ENTERPRISES, INC.**Current Principal Place of Business:**3090 CHARLES AVENUE  
CLEARWATER, FL 33761**Current Mailing Address:**3090 CHARLES AVENUE  
CLEARWATER, FL 33761 US**FEI Number:** 59-3171145**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROGERS, LINDA A  
3090 CHARLES AVE  
CLEARWATER, FL 33761 US*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**Officer/Director Detail :**

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | ROGERS, PHILIP       |
| Address         | 4056 SALEM SQUARE CT |
| City-State-Zip: | PALM HARBOR FL 34685 |

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | ROGERS, LINDA        |
| Address         | 4056 SALEM SQUARE CT |
| City-State-Zip: | PALM HARBOR FL 34685 |

|                 |                  |
|-----------------|------------------|
| Title           | VP               |
| Name            | HUPP, ROBERT     |
| Address         | 1191 TAYLOR DR   |
| City-State-Zip: | DUNEDIN FL 34698 |

|                 |                          |
|-----------------|--------------------------|
| Title           | VP                       |
| Name            | ANDERSON, WALTER T       |
| Address         | 5417 LEEWARD LN          |
| City-State-Zip: | NEW PORT RICHEY FL 34652 |

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | MALLOY, TIMOTHY      |
| Address         | 2430 INDIAN TRAIL E  |
| City-State-Zip: | PALM HARBOR FL 34683 |

*I hereby 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 all other like empowered.*

**SIGNATURE:** LINDA A. ROGERS**PRESIDENT****01/16/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date