

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000053978

**Entity Name:** KOUWEN-HOVEN & HOSKINS SYSTEMS, INC.**Current Principal Place of Business:**915 S. RIVERSIDE DRIVE  
32902  
INDIALANTIC, FL 32903**Current Mailing Address:**P.O. BOX 10  
MELBOURNE, FL 32902 US**FEI Number: 59-3269742****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILLIGAN, SEAN  
915 S. RIVERSIDE DRIVE  
INDIALANTIC, FL 32903 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	MR.
Name	MILLIGAN, SEAN H
Address	915 S. RIVERSIDE DR.
City-State-Zip:	INDIALANTIC FL 32903

Title	MR.
Name	MILLIGAN, SEAN
Address	PO BOX 10
City-State-Zip:	MELBOURNE FL 32902

Title	MR.
Name	MILLIGAN, SEAN
Address	PO BOX 10
City-State-Zip:	MELBOURNE FL 32902

Title	MR.
Name	MILLIGAN, SEAN
Address	PO BOX 10
City-State-Zip:	MELBOURNE FL 32902

Title	MR.
Name	MILLIGAN, SEAN
Address	PO BOX 10
City-State-Zip:	MELBOURNE FL 32902

Title	MR.
Name	MILLIGAN, SEAN
Address	PO BOX 10
City-State-Zip:	MELBOURNE FL 32902

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: SEAN MILLIGAN****OWNER****02/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date