2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005
Secretary of State

DOCUMENT# M66492

Entity Name: A. GIGUERE, INC.

Current Principal Place of Business:

14815 ELMONT AVE
SPRING HILL, FL 34610

New Principal Place of Business:

14815 ELMONT AVE
SPRING HILL, FL 34610 38

Current Mailing Address:

14815 ELMONT AVE
SPRING HILL, FL 34610

New Mailing Address:

14815 ELMONT AVE
SPRING HILL, FL 34610 38

FEI Number: 59-2879314 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIGUERE, CHANTAL
14815 ELMONT AVE
SPRING HILL,, FL 34610 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: DP ( ) Delete
Name: GIGUERE, ARMAND,
Address: 14815 ELMONT AVE
City-St-Zip: SPRING HILL, FL 34610 US

Title: DVP ( ) Delete
Name: GIGUERE, DOMINIQUE,
Address: 14815 ELMONT AVENUE
City-St-Zip: SPRING HILL, FL 34610 US

Title: T ( ) Delete
Name: GIGUERE, PHILLIPPE,
Address: 7153 SAINT CLAIR LANE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: S ( ) Delete
Name: GIGUERE, DAVID,
Address: 7641 HAWTHORN DRIVE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: D ( ) Delete
Name: GIGUERE, CHANTAL,
Address: 14815 ELMONT AVE
City-St-Zip: SPRING HILL, FL 34610 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: GIGUERE, PHILLIPPE,
Address: 9100 SAINT CLAIR LANE
City-St-Zip: PORT RICHEY, FL 34668 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHANTAL GIGUERE D 04/21/2005

Electronic Signature of Signing Officer or Director Date