

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2008 08:00 AM
Secretary of State

DOCUMENT # 344083	
1. Entity Name GAGNON & ASSOCIATES, INC.	

Principal Place of Business 5608 BROADWAY WEST PALM BEACH FL 33407	Mailing Address 5608 BROADWAY WEST PALM BEACH FL 33407
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State	City & State	4. FEI Number 59-1303476	Applied For ☐ Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
GAGNON, ERNEST C JR 5608 BROADWAY WEST PALM BEACH FL	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title. If applicable. If NOT Registered Agent, signature required when submitting. DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

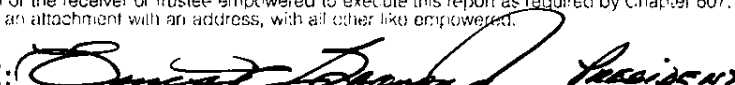
9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	PD ☐ Delete
NAME	GAGNON, ERNEST C JR
STREET ADDRESS	5608 BROADWAY
CITY-STATE-ZIP	WEST PALM BCH, FL 00000
TITLE	D ☐ Delete
NAME	GAGNON, MATTHEW J.
STREET ADDRESS	5060 GREENBRIAR TR
CITY-STATE-ZIP	MOUNT DORA FL 32757
TITLE	VTD ☐ Delete
NAME	GAGNON, LORETTE E
STREET ADDRESS	5608 BROADWAY
CITY-STATE-ZIP	WEST PALM BEACH, FL00000
TITLE	D ☐ Delete
NAME	IRBY, LYNN A
STREET ADDRESS	4540 SPRING CANYON HEIGHTS #208
CITY-STATE-ZIP	COLORADO SPRINGS CO 80907
TITLE	D ☐ Delete
NAME	GAGNON, MARK P
STREET ADDRESS	8101 CHARDONNAY COVE
CITY-STATE-ZIP	AUSTIN TX 78750
TITLE	D ☐ Delete
NAME	GAGNON, STEVEN J.
STREET ADDRESS	1073 BEDFORD AVE
CITY-STATE-ZIP	PALM BEACH GARDENS FL 33403

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U000000888738
04/22/08-80026-006 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **President**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR