

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 344083

FILED
Apr 05, 2010
Secretary of State

Entity Name: GAGNON & ASSOCIATES, INC.

Current Principal Place of Business:

5608 BROADWAY
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

5608 BROADWAY
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 59-1303476 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAGNON, ERNEST C JR
5608 BROADWAY
WEST PALM BEACH, FL 33407 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
Name: GAGNON, ERNEST C JR
Address: 5608 BROADWAY
City-St-Zip: WEST PALM BCH,, FL 33407 US

Title: D
Name: GAGNON, MATTHEW J.
Address: 5060 GREENBRIAR TR
City-St-Zip: MOUNT DORA, FL 32757 US

Title: VTD
Name: GAGNON, LORETTE E
Address: 5608 BROADWAY
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: D
Name: IRBY, LYNN A
Address: 4540 SPRING CANYON HEIGHTS #208
City-St-Zip: COLORADO SPRINGS, CO 80907 US

Title: D
Name: GAGNON, MARK P
Address: 8101 CHARDONNAY COVE
City-St-Zip: AUSTIN, TX 78750 US

Title: D
Name: GAGNON, STEVEN J.
Address: 1073 BEDFORD AVE
City-St-Zip: PALM BEACH GARDENS, FL 33403 US

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: ERNEST C. GAGNON, JR.

PRES

04/05/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date