

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUL 31 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F20618

(7)

1. Corporation Name

FOGARTY ENTERPRISES, INC.

Principal Place of Business

2555 27TH AVE., G-4
VERO BCH FL 32960

Mailing Address

2555 27TH AVE., G-4
VERO BCH FL 32960

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/20/1981

3a. Date of Last Report

04/04/1994

4. FEI Number

59-2077891

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 1476 14TH COURT

Suite, Apt. #, etc.

22

City & State

23 VERO BEACH FL

Zip

24 32960

Country

25 USA

2a. Mailing Address

26 1476 14TH COURT

Suite, Apt. #, etc.

27

City & State

28 VERO BEACH FL

Zip

29 32960

Country

30

9. Name and Address of Current Registered Agent

FOGARTY, GEORGE A.
1476 14TH COURT
VERO BEACH FL 32960

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	FOGARTY, JEFFREY L
STREET ADDRESS	9217 LAKE HICKORY NUT DR
CITY, ST, ZIP	WINTER GARDEN FL
TITLE	TD
NAME	FOGARTY, MATTHEW J
STREET ADDRESS	3023 - C HERON LAKE DRIVE
CITY, ST, ZIP	KISSIMEE FL
TITLE	VD
NAME	FOGARTY, RUTH
STREET ADDRESS	1476 14TH CT
CITY, ST, ZIP	VERO BCH, FL 00000
TITLE	PD
NAME	FOGARTY, GEORGE A
STREET ADDRESS	1476 14TH CT
CITY, ST, ZIP	VERO BCH, FL 00000
TITLE	VD
NAME	FOGARTY, MARK ALAN
STREET ADDRESS	1385 BULLOCK PLACE
CITY, ST, ZIP	LILBURN GA
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	TD
2.3 STREET ADDRESS	FOGARTY, MATTHEW J
2.4 CITY, ST, ZIP	1676 HIGHWAY AVE VERO BEACH, FL 32960
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GEORGE A. FOGARTY *George A. Fogarty* 7-24-95 401-567-0700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR