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Secretary of State

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PROFIT. CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

[1. 	DOCUMENT # F20618 Corporation Name FOGARTY ENTERPRISES, INC.			02-05-1999 90013 002 ****1	50.00
Pi	rincipal Place of Business	Mailing Address			
1476 14TH COURT		· ·			
=== ==		1476 14TH COURTY VERO BEACH FL 32960			
US		US		DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualifed	
				02/20/1981	
2.	Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	-:-	26		59-2077891	Not Applicable
<u> </u>	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22	Land to the state of the state	27		5. Certifcate of Status Desired	Fee Required
	City & State	City & State =====		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
	Zip Country	Zip	Country	8. This corporation owes the current year	
24	25		30	Personal Property Tax.	☐ Yes [X]No
-	9. Name and Address of Current I	Registered Agent	81 Name	10. Name and Address of New Registe	red Agent
	FOGARTY, GEORGE A.		81 Name		
	FOG 1476 14TH COURT SES. INC.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	VERO BEACH FL 32960		02	A SERVICE STORY OF THE SERVICE MINISTER ASSESSMENT OF THE SERVICE	
			83		
			84 City	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	85 Zip Code
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147	N Latti Consol	A test a serie and a series			┌ <u> </u>
11	Pursuant to the provisions of Sections 607,0502 a	and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purpos	e of changing its registered
NE US	A 1-11 COURT Pursuant to the provisions of Sections 607.0502 a full office of registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	and 607.1508, Florida Statute Florida: Such change was au ns of, Section 607.0505, Flor	es, the above-named corp thorized by the corporational statutes.	poration submits this statement for the purpos on's board of directors. I hereby accept the a	e of changing its registered ppointment as registered
	GNATURE	ns of, Section 607.0505, Figh	ida Statutes.		e of changing its registered ppointment as registered
SI	GNATURE Signature, typed or printed name of registered agent are	nd title if applicable. (NOTE:	Registered Agent signature require	d when reinstating) // 155// 1	E
SI0	GNATURE Signature, typed or printed name of registered agent are. OFFICERS AND	nd title if applicable. (NOTE:	Registered Agent signature require	nd when reinstating) (* \\ \frac{1}{2} \\ \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	E S AND DIRECTORS IN 12
12 T/TL	GNATURE Signature, typed or printed name of registered agent are. OFFICERS AND LE SD	nd title if applicable. (NOTE:	Registered Agent signature require 13. 1.1 TITLE	d when reinstating) // 155// 1	E
12 T/TL NAM	GNATURE Signature, typed or printed name of registered agent at OFFICERS AND LE SD FOGARTY, JEFFREY L	nd title if applicable. (NOTE:	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME	nd when reinstating) (* \\ \frac{1}{2} \\ \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	E S AND DIRECTORS IN 12
12 TITL NAM STR	GNATURE Signature, typed or printed name of registered agent are OFFICERS AND LE FOGARTY, JEFFREY L REET ADDRESS 9217 LAKE HICKORY NUT DR	nd title if applicable. (NOTE:	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	nd when reinstating) (* \\ \frac{1}{2} \\ \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	E S AND DIRECTORS IN 12
12 TITL NAM STR	GNATURE Signature, typed or printed name of registered agent are OFFICERS AND SD FOGARTY, JEFFREY L POGARTY, JEFFREY L SO FOGARTY, JEFFREY L WINTER GARDEN FL	nd title if applicable. (NOTE: DIRECTORS DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	nd when reinstating) (* \\ \frac{1}{2} \\ \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	E S AND DIRECTORS IN 12 Addition
12 TITL NAM STR CITY	GNATURE Signature, typed or printed name of registered agent are OFFICERS AND LE FOGARTY, JEFFREY L PREETADDRESS 9217 LAKE HICKORY NUT DR WINTER GARDEN FL E TD	nd title if applicable. (NOTE:	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	nd when reinstating) (* \\ \frac{1}{2} \\ \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	E S AND DIRECTORS IN 12
12 TITL NAW STR CITY TITL NAW	GNATURE Signature, typed or printed name of registered agent are OFFICERS AND LE SD FOGARTY, JEFFREY L PACET ADDRESS PACET ADD	nd title if applicable. (NOTE: DIRECTORS DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	nd when reinstating) (* \\ \frac{1}{2} \\ \frac{1}{2} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	E S AND DIRECTORS IN 12 Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

1/18/99

561 567 0700

Daytime Phone #