


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 11, 2006 08:00 AM
Secretary of State

DOCUMENT # F20618 1. Entity Name FOGARTY ENTERPRISES, INC.		
Principal Place of Business 83 CROOKED TREE LANE APT 106 VERO BEACH, FL 32962 US	Mailing Address 83 CROOKED TREE LANE APT 106 VERO BEACH, FL 32962 US	
<h2>DO NOT WRITE IN THIS SPACE</h2>		
6. Name and Address of Current Registered Agent FOGARTY, GEORGE A. 83 CROOKED TREE LANE APT 106 VERO BEACH, FL 32962		
<h2>DO NOT WRITE IN THIS SPACE</h2>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FOGARTY, JEFFREY L 9217 LAKE HICKORY NUT DR WINTER GARDEN, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FOGARTY, MATTHEW J 1476 14TH COURT VERO BEACH, FL 32960	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FOGARTY, RUTH 83 CROOKED TREE LANE APT 106 VERO BEACH, FL 32962	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOGARTY, GEORGE A 83 CROOKED TREE LANE APT 106 VERO BEACH, FL 32962	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FOGARTY, MARK ALAN 2688 GREEN VALLEY ROAD SNELLVILLE, GA 30078	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: <u>George A. Fogarty</u> George A. Fogarty <u>1/10/06</u> <u>772-567-0848</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2077891	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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01/11/06-80072-011 150.00

**DO NOT WRITE
IN THIS SPACE**