

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 10, 2007 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



03272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2077891
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOGARTY, GEORGE A.
83 CROOKED TREE LANE APT 106
VERO BEACH, FL 32962

DO NOT WRITE
IN THIS SPACE

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

U000000698159
04/18/07-20070-010 150.00

10. 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	1476 14TH COURT
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	VD
NAME	FOGARTY, RUTH
STREET ADDRESS	83 CROOKED TREE LANE APT 106
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	PD
NAME	FOGARTY, GEORGE A
STREET ADDRESS	83 CROOKED TREE LANE APT 106
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	VD
NAME	FOGARTY, MARK ALAN
STREET ADDRESS	2688 GREEN VALLEY ROAD
CITY-ST-ZIP	SNELLVILLE, GA 30078
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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: George A. Fogarty GEORGE A. FOGARTY 4/5/07 772-321-3961
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #