

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # G57710

1. Entity Name  
CARRICK REALTY CORPORATION



Principal Place of Business

% ELEANOR L. CURRAN  
532 12TH AVENUE S.  
NAPLES, FL 33940

Mailing Address

C/O RICHARD W CURRAN  
25 WOOLWORTH ST.  
LONGMEADOW, MA 01106



04212005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2343562

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CURRAN, RICHARD  
532 12TH AVE. S.  
SUITE 1600  
NAPLES, FL 34102

**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, 2005 Fee will be \$550.00**

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

UN00000333214

04/26/05-B0089-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	CURRAN, ELEANOR
STREET ADDRESS	532 12TH AVE S
CITY-ST-ZIP	NAPLES, FL 00000
TITLE	TD
NAME	CURRAN, RICHARD W.
STREET ADDRESS	25 WOOLWORTH STREET
CITY-ST-ZIP	LONGMEADOW, MA 01106
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 exemption stated in Section 119.07(3)(f), 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:

*Richard W. Curran* RICHARD W. CURRAN

4/22/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #