

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2006 08:00 AM
Secretary of State



DOCUMENT # J97110
 1. Entity Name
LAWRENCE W. GOUGH, INC.

Principal Place of Business Mailing Address
3389 CYPRESS GARDENS ROAD **P. O. BOX 391**
WINTER HAVEN FL 33884 **WINTER HAVEN FL 33882**
US **US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

1st MOORE CR2E034 (10/05)

4. FEI Number Applied For
01-0433336 Not Applicable

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

6. Name and Address of Current Registered Agent
LAWRENCE GOUGH
3389 CYPRESS GARDENS ROAD
WINTER HAVEN FL 33884

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 types or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
DST	FITZPATRICK, ALBERT	3 SUGAR LOAF ST.	HOULTON ME 04730	<input type="checkbox"/>
D	FITZPATRICK, FRANCIS J.	134 SMITH RD.	HOULTON ME 04730	<input type="checkbox"/>
D	GOOD, THOMAS L.	462 FLECHTER RD	MONTICELLO ME 04730	<input type="checkbox"/>
DP	GOUGH, LAWRENCE W.	148 WALKER RD.	HODGDON ME 04730	<input type="checkbox"/>
D	GOUGH, MICHAEL	741 COUNTRY RD	NEW LIMERICK ME 04761	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Lawrence W. Gough* Lawrence W. Gough 4/5/06 207-532-7443