

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000035836

1. Entity Name
MCENROE DEVELOPMENT, INC.



Principal Place of Business
5338 SELBY DR.
FT. MYERS, FL 33919

Mailing Address
5338 SELBY DR.
FT. MYERS, FL 33919



01182004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1002140

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MCENROE, JOHN T
5338 SELBY DR.
FT. MYERS, FL 33919

**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

John T. McEnroe Pres (No change)

3-24-04

Signature of individual or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when filing statement.)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

1000000098507
03/29/04-80043-014 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MCENROE, JOHN T
STREET ADDRESS	5338 SELBY DR.
CITY-ST-ZIP	FT. MYERS, FL 33919
TITLE	D
NAME	MCENROE, KATHLEEN A
STREET ADDRESS	5338 SELBY DR.
CITY-ST-ZIP	FT. MYERS, FL 33919
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)(i), 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:

John T. McEnroe Pres

Date

3-24-04

Daytime Phone #

239-229-1466