

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90112 027 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000037061			
1. Entity Name KAVANAGH CONSULTING, INC.			
Principal Place of Business 1320 SW 19TH STREET BOCA RATON, FL 33486 US		Mailing Address 1320 SW 19TH STREET BOCA RATON, FL 33486 US	
2. Principal Place of Business 9164 Rutledge Ave Suite, Apt. #, etc.		3. Mailing Address 9164 Rutledge Ave Suite, Apt. #, etc.	
City & State BOCA RATON FL		City & State BOCA RATON FL	
Zip 33434		Country USA	
4. FEI Number 05-1096057		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent GASKILL, CLARE K 1320 SW 19TH STREET BOCA RATON, FL 33486		7. Name and Address of New Registered Agent Name CLARE KAVANAGH GASKILL Street Address (P.O. Box Number is Not Acceptable) 9164 Rutledge Ave City BOCA RATON FL Zip Code 33434	
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: <u>Clare Kavanagh Gaskill</u> DATE: <u>04/28/2003</u> (Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when terminating.)			
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
PST GASKILL, CLARE K 1320 SW 19TH STREET BOCA RATON, FL 33486			
PST CLARE KAVANAGH GASKILL 9164 Rutledge Ave BOCA RATON FL 33434			
Secretary/Treasurer 9164 Rutledge Ave BOCA RATON FL 33434			
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 807, 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>Clare Kavanagh Gaskill</u>		DATE: <u>04/28/2003</u> <u>(661) 558-0272</u>	