

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90024 041 ***150.00

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1. Entity Name

JOHN J. FOLEY & ASSOCIATES, INC.



Principal Place of Business

3221 GRENADINE COURT
TAVARES FL 32778

Mailing Address

3221 GRENADINE COURT
TAVARES FL 32778

2. Principal Place of Business

1052 W. DIAMOND SHORE LOOP

Suite, Apt. #, etc.

3. Mailing Address

1052 W. DIAMOND SHORE LOOP

Suite, Apt. #, etc.

City & State

HERNANDO, FL

Zip

34442

Country

CITRUS

City & State

HERNANDO, FL

Zip

34442

Country

CITRUS

4. FEI Number

52-2373472

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)



6. Name and Address of Current Registered Agent

FOLEY, JOHN J
3221 GRENADINE COURT
TAVARES FL 32778

7. Name and Address of New Registered Agent

Name

FOLEY, JOHN J

Street Address (P.O. Box Number is Not Acceptable)

1052 W. DIAMOND SHORE LOOP

City

HERNANDO

FL

Zip Code

34442

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 J. Foley

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

(NOTE: Registered Agent signature required when reinstating)

1-29-06

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

Trust Fund Contribution. ☐

\$5.00 May Be

Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete

NAME FOLEY, JOHN J
STREET ADDRESS 3221 GRENADINE COURT
CITY-ST-ZIP TAVARES FL 32778

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition

NAME FOLEY, JOHN J
STREET ADDRESS 1052 W. DIAMOND SHORE LOOP
CITY-ST-ZIP HERNANDO, FL 34442

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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:

John J. Foley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-06

Date

352-270-3384

Daytime Phone #