

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056189

Entity Name: GILLIGAN SERVICES, INC.

FILED
Apr 21, 2004
Secretary of State

Current Principal Place of Business:

14403 NOTTINGHAM WAY CIR
ORLANDO, FL 32828

New Principal Place of Business:

707 MULLET DRIVE
SUITE 105
CAPE CANAVERAL, FL 32920

Current Mailing Address:

14403 NOTTINGHAM WAY CIR
ORLANDO, FL 32828

New Mailing Address:

707 MULLET DRIVE
SUITE 105
CAPE CANAVERAL, FL 32920

FEI Number: 77-0600581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTINEZ, EVELYN
14403 NOTTINGHAM WAY CIR
ORLANDO, FL 32828

Name and Address of New Registered Agent:

MARTINEZ, EVELYN
707 MULLET DRIVE
SUITE 105
CAPE CANAVERAL, FL 32920

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.

SIGNATURE: _____

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: MARTINEZ, EVELYN
Address: 14403 NOTTINGHAM WAY CIR
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: SANTAYANA, GREGORIO
Address: 14403 NOTTINGHAM WAY CIR
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: MARTINEZ, EVELYN
Address: 707 MULLET DRIVE, SUITE 105
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D (X) Change () Addition
Name: SANTAYANA, GREGORIO
Address: 707 MULLET DRIVE, SUITE 105
City-St-Zip: CAPE CANAVERAL, FL 32920

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELYN MARTINEA

DPS

04/21/2004

Electronic Signature of Signing Officer or Director

Date