## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P03000091497**

MCGOVERN & MCGOVERN, INC.



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

Principal Place of Business 401 NW 127TH AVE, #11 PLANTATION, FL 33325

Mailing Address

401 NW 127TH AVE, #11 PLANTATION, FL 33325



03232006

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-0182888

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

SCHURR, RICHARD A 10867 SW 88TH TERRACE MIAMI, FL 33176

## DO NOT WRITE

,				11N	INIS SPACE	
5. The above the obligat	named entity submits this statement for the pions of registered agent.	surpase of changing its registere	d office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and a	iccei
SIGNATURE	Signature, typed or printed name of registered egent and ritle	it applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	_
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing .	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET AODRESS GITY-ST-ZIP	PTSD MCGOVERN, JOHN 401 NW 127TH AVE, #11 PLANTATION, FL 33325				04/24/06-80009-018 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						ļ
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STITEET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
title Name Street address City-St-Zip					·	
12 Choroby o	portify that the information symplicit with this fi	ling does not qualify for the exe	motions co	ntained in Chanter 1	19 Florida Statutes, I further certify that the informa-	ation

The pay certify that the monthshort supplies with this limit does not qualify for the exemptions contained in Chapter 11s, prortal statutes. I turner certify that the 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. 5041 W MC(30V, EAN (PAGE) 4/5-66 954-476-0999