

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90310 037 ***150.00



DOCUMENT # P03000135186
 1. Entity Name
 RICHARD DAUGHERTY INC.

Principal Place of Business
 3210 STONEWOOD COURT
 ORLANDO FL 32806

Mailing Address
 3210 STONEWOOD COURT
 ORLANDO FL 32806



2. Principal Place of Business
 3210 Stonewood Ct.
 Suite, Apt. #, etc.

3. Mailing Address
 SAME
 Suite, Apt. #, etc.

1st MOORE CR2E034 (10/05)

City & State
 Orlando, FL

City & State
 FL

Zip
 32806

Country
 Orange

Zip
 Country

4. FEI Number
 20-0402416

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 DAUGHERTY, RICHARD
 3210 STONEWOOD COURT
 ORLANDO FL 32806

7. Name and Address of New Registered Agent
 Name: Richard Daugherty
 Street Address (P.O. Box Number is Not Acceptable):
 3210 Stonewood Ct
 City: Orlando FL Zip Code: 32806

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: *Richard E. Daugherty*
 (NOTE: Registered Agent signature required when re-registering)

DATE: 3-28-06

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	P	<input type="checkbox"/> Delete
NAME	DAUGHERTY, RICHARD	
STREET ADDRESS	3210 STONEWOOD COURT	
CITY-ST-ZIP	ORLANDO FL 32806	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 or empowered.

SIGNATURE: *Richard E. Daugherty* PRES.
 Richard Daugherty, President

Date: 4-3-06 Daytime Phone #: 407-859-1303