

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90303 027 ***150.00

DOCUMENT # P04000109338	
1. Entity Name ROBIN E. LANIGAN, P.A.	



Principal Place of Business 211 N LIBERTY ST - STE 2 JACKSONVILLE, FL 32202	Mailing Address 211 N LIBERTY ST - STE 2 JACKSONVILLE, FL 32202
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40068624



2. Principal Place of Business 3325 Hendricks Avenue	3. Mailing Address 3325 Hendricks Avenue
Suite, Apt. #, etc. Suite C	Suite, Apt. #, etc. Suite C
City & State Jacksonville, FL	City & State Jacksonville, FL
Zip 32207	Country

04222005 Chg-P CR2E034 (10/03)

4. FEI Number 20-1306751	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LANIGAN, ROBIN E 211 N LIBERTY ST - STE 2 JACKSONVILLE, FL 32202	7. Name and Address of New Registered Agent Name Lanigan, Robin E. Street Address (P.O. Box Number is Not Acceptable) 3325 Hendricks Avenue Suite C City Jacksonville FL Zip Code 32207
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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: *[Signature]* DATE: 4/22/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANIGAN, ROBIN E 211 N LIBERTY ST - STE 2 JACKSONVILLE, FL 32202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lanigan, Robin E. 3325 Hendricks Avenue, Suite C Jacksonville, FL 32207 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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: *[Signature]* Robin E. Lanigan 4/22/05 704-396-6500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/12/04--01046--020 **78.75

EFFECTIVE DATE
07/23/2004

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

DATE 12-01-04 BY 7:37

FILED

604-27103

TH 7/26/04

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TRANSMITTAL LETTER

June 30, 2004

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

SUBJECT: Robin E. Lanigan, P.A.

Enclosed is an original and one copy of the following:

1. Articles of Incorporation of Robin E. Lanigan, P.A.;
2. Certificate of Designation of Registered Agent/Registered Office for Robin E. Lanigan, P.A.;

And

A check made payable to the Department of State in the amount of **\$78.75 for filing fee and for a certified copy.** Please send the copy to:

ROBIN E. LANIGAN
211 North Liberty Street, Suite 2
Jacksonville, Florida 32202
(904) 634-1929

FROM: ROBIN E. LANIGAN
211 North Liberty Street, Suite 2
Jacksonville, Florida 32202
(904) 634-1929

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ATTACHMENT
EFFECTIVE DATE
07/23/2004
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**Articles of Incorporation
Law Office of Robin E. Lanigan**

ARTICLE ONE: NAME

The name of this corporation is Robin E. Lanigan, P.A., and the principle business address of the Corporation is 211 North Liberty Street, Suite 2, Jacksonville, Florida 32202.

ARTICLE TWO: COMMENCEMENT AND DURATION

Pursuant to Section 607.0203, Florida Statutes, this corporation shall commence upon the date of the execution of the Articles of Incorporation, which is July 23, 2004, and shall be filed with the Secretary of State within five (5) business days from said date. This corporation shall have perpetual existence.

ARTICLE THREE: PURPOSE

The corporation is organized as a professional corporation for the purpose of providing legal services by an attorney or attorneys to the general public.

ARTICLE FOUR: CAPITAL

This corporation is authorized to issue 5 shares of Common Stock, all of which shall have the par value of \$0.01 per share.

ARTICLE FIVE: INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered agent is 211 North Liberty Street, Suite 2 Jacksonville, Florida 32202, and the name of the registered agent is Robin E. Lanigan.

ARTICLE SIX: INITIAL BOARD OF DIRECTORS

The number of directors constituting the initial board of directors of this Corporation shall be 1 and the name and address of said persons who are to serve as member thereof are as follows:

ATTACHMENT

Robin E. Lanigan
211 North Liberty Street,
Suite 2
Jacksonville, Florida 32202

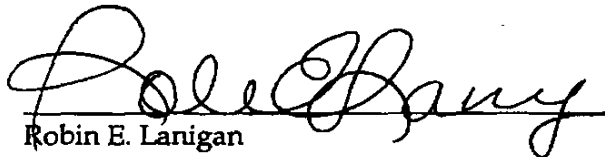
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ARTICLE SEVEN: INCORPORATORS

The name and address of the incorporator is:

Robin E. Lanigan
211 North Liberty Street,
Suite 2
Jacksonville, Florida 32202

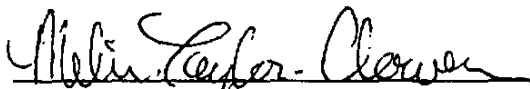
IN WITNESS THEREOF, we, the undersigned incorporators, have hereunto set our hands and seals for the purpose of forming this corporation under the laws of the State of Florida, and we thereby subscribed, acknowledge and file with the Department of State of the State of Florida these Articles of Incorporation, all on this 22nd day of July 2004.


Robin E. Lanigan

STATE OF FLORIDA
COUNTY OF DUVAL

BEFORE ME, this undersigned authority, personally appeared Robin E. Lanigan the incorporator of Robin E. Lanigan, P.A., to me well known and to me known to be the individual described in and who executed the foregoing Articles of Incorporation as her several voluntary act and deed.

WITNESSED my hand and official seal on the 22nd day of July 2004.


Notary Public, State of Florida at Large

Melissa Taylor-Clowers
Print to Type Name of Notary

My Commission Expires:
SEAL/STAMP:



Melissa Taylor-Clowers
My Commission DD009585
Expires March 15, 2005

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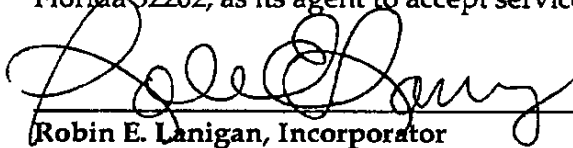
**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE FOR**

Robin E. Lanigan, P.A.

APPOINTMENT

Pursuant to the provisions of Section 607.0501, Florida Statutes, **Robin E. Lanigan, P.A.**, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida:

That **Robin E. Lanigan, P.A.**, desiring to organize under the laws of the State of Florida, with its principle place of business in the city of Jacksonville, Florida, has named **Robin E. Lanigan, Esquire**, whose address is 211 North Liberty Street, Suite 2, Jacksonville, Florida 32202, as its agent to accept service of process within the State of Florida.

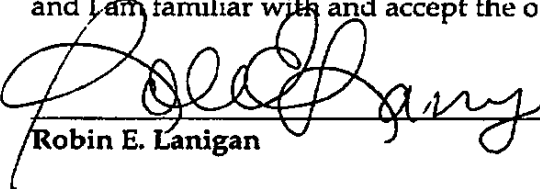

Robin E. Lanigan, Incorporator

Dated: _____

7-22-04

ACCEPTANCE

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept appointment as registered agent and agree to act in this capacity. I further agree to the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Robin E. Lanigan

Dated: _____

7-22-04