


2005 FOR PROFIT CORPORATION ANNUAL REPORT

pd4-15-05 4183
FILED

Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000003627	
1. Entity Name M. DAUGHERTY PLASTERING, INC.	

Principal Place of Business 2105 WINDING CREEK LANE FORT PIERCE, FL 34981	Mailing Address 2105 WINDING CREEK LANE FORT PIERCE, FL 34981
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DO NOT WRITE IN THIS SPACE



01052005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0561436	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**DAUGHERTY, MARGARET
2105 WINDING CREEK LANE
FORT PIERCE, FL 34981**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable. DATE _____

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD DAUGHERTY, MARGARET 2105 WINDING CREEK LANE FT. PIERCE, FL 34982
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DAUGHERTY, JEROLD 2105 WINDING CREEK LANE FT. PIERCE, FL 34982
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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: Margaret Daugherty **4-15-05** **772/464-4235**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #

MARGARET DAUGHERTY