

2007 FOR PROFIT CORPORATION ANNUAL REPORT

8/1/2007-90035-040-\$163.75-\$163.75

1072

DOCUMENT # P95000009983 1. Entity Name DONIGAN ENTERPRISES, INC.			
Principal Place of Business 3201 GLENMOOR DR. WEST PALM BEACH, FL 33409		Mailing Address P.O. BOX 6804 LAKE WORTH, FL 33466-6804	
2. Principal Place of Business - No P.O. Box # 11104 Glenmoor Dr.		3. Mailing Address Suite, Apt. #, etc.	
City & State West Palm Beach, FL		City & State	
Zip 33409	Country Palm Beach	Zip	Country
4. FEI Number 65-0549028		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEYER, ESQ, STEVEN H 2295 N.W. CORPORATE BLVD STE 117 BOCA RATON, FL 33431		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, typed or printed name of registered agent and file if applicable (NOT: Registered Agent's signature required when reinstating)			
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☒ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete P HANNIGAN, DONALD J 3201 GLENMOOR DR. WEST PALM BEACH, FL 33409	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 empowered.			
SIGNATURE: <u>Donald J. Hannigan</u> DONALD J. HANNIGAN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 7/12/07	Daytime Phone # 561-541-6168

FILED
Aug 17, 2007 8:00 A.M.
Secretary of State



2672

8/15/07

Dear Ms. Ashton:

As per our conversation I am requesting, via this letter, that my annual report be processed. Earlier this year I filled out a request form your office mailed to me in order to receive my annual report form.

I never received the form, only a late notice, and this is the reason I phoned prior to speaking with you. In the future would you please send me the actually re-natal form to complete and mail in with a check so there is less chance for error.

Thank you
Don Hannigan

Donigan Ent Inc. DBA Palisade Mag.