


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P95000053063**

1. Entity Name  
**R. EMMETT MCTIGUE, INC.**



Principal Place of Business      Mailing Address

**1001 EAST LAS OLAS BLVD.  
SUITE 200  
FT. LAUDERDALE, FL 33301**

**P.O. BOX 030248  
FT. LAUDERDALE, FL 33303**

**DO NOT WRITE IN THIS SPACE**



D1102006    No Chg-P    CR2E034 (11/05)

4. FEI Number  
**59-3336394**      Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**TUTHILL, SARAH M  
1001 E LAS OLAS BOULEVARD #200  
SUITE 200  
FORT LAUDERDALE, FL 33301**

**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) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.     **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC MCTIGUE, R E 1001 E LAS OLAS BOULEVARD #200 FT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS TUTHILL, SARAH M 1001 E LAS OLAS BOULEVARD #200 FORT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

1100000437831  
02/23/06 80066-012 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:** *Sarah Mctigue Tuthill*      *President 1-19-06*      *9544635700*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #