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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V10857 (3)
1. Corporation Name
J.M. CARRIGAN CORPORATION



Principal Place of Business Mailing Address
6464 PINE AVENUE 6464 PINE AVENUE
SANIBEL FL 33957 SANIBEL FL 33957-2034

3. Date Incorporated or Qualified 02/03/1992 3a. Date of Last Report 04/02/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 65-0305709	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip Country	28 Zip Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No
24	25	29	30

9. Name and Address of Current Registered Agent

CARRIGAN, REBECCA
6464 PINE AVENUE
SANIBEL FL 33957

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and box if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	CARRIGAN, JOHN M.	1.2 NAME	
STREET ADDRESS	6464 PINE AVENUE	1.3 STREET ADDRESS	
CITY - ST - ZIP	SANIBEL FL	1.4 CITY - ST - ZIP	
TITLE	VD	2.1 TITLE	
NAME	CARRIGAN, JOHN M. JR.	2.2 NAME	
STREET ADDRESS	8445 CARDINAL RD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	FORT MYERS FL	2.4 CITY - ST - ZIP	
TITLE	VD	3.1 TITLE	
NAME	CARRIGAN, JAMES M.	3.2 NAME	
STREET ADDRESS	6464 PINE AVENUE	3.3 STREET ADDRESS	
CITY - ST - ZIP	SANIBEL FL	3.4 CITY - ST - ZIP	
TITLE	ST	4.1 TITLE	
NAME	CARRIGAN, REBECCA G.	4.2 NAME	
STREET ADDRESS	6464 PINE AVE.	4.3 STREET ADDRESS	
CITY - ST - ZIP	SANIBEL FL	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13, unchanged, or in an attachment with an address.

SIGNATURE:

Rebecca G. Carrigan 1/15/97 941 334-1807
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)