## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # V10857

1. Entity Name

J.M. CARRIGAN CORPORATION



Principal Place of Business

6464 PINE AVENUE SANIBEL, FL 33957 Mailing Address

6464 PINE AVENUE SANIBEL, FL 33957

## **FILED** Jan 16, 2007 8:00 am Secretary of State

01-16-2007 90201 020 \*\*\*150.00

60000757



 $\Box$ 

01072007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0305709

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CARRIGAN, REBECCA 6464 PINE AVENUE SANIBEL, FL 33957

## DO NOT WRITE IN THIS SPACE

the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and trifle if applicable. (NOTE Registered Agent signature required when reinstating)					DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARRIGAN, JOHN M. 6464 PINE AVENUE SANIBEL, FL					
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	VD CARRIGAN, JOHN M. JR. 6464 PINE AVE SANIBEL, FL 33957					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARRIGAN, JAMES M. 6464 PINE AVENUE SANIBEL, FL			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CARRIGAN, REBECCA G. 6464 PINE AVE. SANIBEL, FL		IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARRIGAN, JOSEPH M 6464 PINE AVE SANIBEL, FL 33957					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 of 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 of an address, with all other like empowered.						

8 The above pamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with, and accept