## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS (9) DOCUMENT # CORRIGAN ENTERPRISES. INC. Principal Place of Business Marino Address 3101 MCCOY ROAD 3101 MCCOY ROAD ORLANDO FL 32009 ORLANDO FL 32812 32812 us 3. Date Incorporated or Qualified 09/08/1992 02/08/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3138977 Not Applicable 26 Suite Apt. #, etc Suite, Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 Oty & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Country $Z_{\rm I} p$ Country 8. This corporation has liability for intangible tax under s. 199.032, $Z_{10}$ 30 Florida Statutes Yes No 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CORRIGAN, CHRISTOPHER Street Address (P.O. Box Number is Not Acceptable) 82 84320 ADMIRAL POINT WINTER PARK FL 32792 63 85 Zip Code 11. Pursuant to the provisions of Sections 697,0502 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. Thereby accept the appointment as registered agent. Fam familiar with and accept the obligations of, Section 607.0505, Florida Statutes Owner Christy OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Corrigan Christopher 143 N. Shadow Bay Orive Change Add tion 1 1 T(I) F TITLE CORRIGAN, CHRISTOPHER 1.2 NAME NAME 8430 ADMIRAL POINT 1.3 STREET ADDRESS STREET ADDRESS orlando, FL 32825 WINTER PARK FL CITY - ST - ZIP 1.4 OHY-SI-ZIP THREE DEL ETE 2 | 1 Till 6 Dr. Change Addition Corrigan, Christy Or. 143 N. Shadon Bay Or. CORRIGAN, CHRISTY NAME 2.2 NAME 8430 ADMIRAL POINT STREET ADDRESS 2.3 STREET ADDRESS Orlando, FL 32825 WINTER PARK FL CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE ☐ Change 3 117-11.6 Addition TITLE 3.2 NAME NAME STREET ACORESS 3.3 STREET ADDRESS 3.4 CITY : ST - ZIP CITY - ST- ZIP DELETE Change ☐ Addition 4 1 1000 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY+ST+ZIP CITY - ST - ZIP [ ] DELETE ☐ Change Addition TITLE 5 1 lifeE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 City - ST - ZiP DELETE 6 1 TITLS Change Add-tion TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS 6.4 C/1Y - ST - Z/P CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

SIGNATURE:

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CR2E034 (12/95)