

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # F51107	
1. Entity Name FINANCIAL SECURITY CONSULTANTS, INC.	

Principal Place of Business 151 NW 1ST AVE DELRAY BEACH, FL 33444	Mailing Address 151 NW 1ST AVE DELRAY BEACH, FL 33444
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DO NOT WRITE IN THIS SPACE



04072006 No Chg-P CR2E034 (11/05)

4. FEI Number 63-0817091	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CAGNEY, WILLIAM P., III, P.A. 53 COUNTRY ROAD SOUTH VILLAGE OF GOLF, FL 33436

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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 title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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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	000000502076 04/25/06-80088-019 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAGNEY, WILLIAM P., III 53 COUNTRY ROAD SOUTH VILLAGE OF GOLF, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RYAN, WILLIAM C. 1047 WATERMILL CIRCLE BIRMINGHAM, AL 35242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS WRIGHT, REGINALD R. 200 BRAEMER PLACE BIRMINGHAM, AL 35242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: <i>Reginald R. Wright</i> Reginald R. Wright	Date: <i>April 10, 2006</i> APR 10 2006	Daytime Phone #: <i>205-967-7647</i> 205-967-7647
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