

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90114 017 ***150.00

DOCUMENT # G00107

1. Entity Name
**SCHAEFER AND FAGAN CONSULTING ENGINEERS,
INC.**



Principal Place of Business
**631 US HIGHWAY 1
SUITE 400
NORTH PALM BEACH, FL 33408**

Mailing Address
**631 US HIGHWAY 1
SUITE 400
NORTH PALM BEACH, FL 33408**

4007-



2. Principal Place of Business
**631 US Highway 1
Suite, Apt. #, etc.
Suite 305**

3. Mailing Address
**631 US Highway 1
Suite, Apt. #, etc.
Suite 305**

02062006 Chg-P CR2E034 (11/05)

City & State
North Palm Beach, FL

City & State
North Palm Beach, FL

4. FEI Number
59-2217796

Applied For
☐ Not Applicable

Zip
33408

Country

Zip
33408

Country

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

6. Name and Address of Current Registered Agent

**FAGAN, GREGORY J.
631 US HIGHWAY 1
SUITE 400
NORTH PALM BEACH, FL 33408**

7. Name and Address of New Registered Agent

Name
Gregory J. Fagan
Street Address (P.O. Box Number is Not Acceptable)
**631 US Highway 1
Suite 305**
City
North Palm Beach FL 33408

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)

3/21/06
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
**DPVS
FAGAN, GREGORY J
631 US HIGHWAY 1, SUITE 400
NORTH PALM BEACH, FL 33408** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
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CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPVS
Gregory J. Fagan
631 US Highway 1, Suite 305
North Palm Beach, FL 33408** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
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CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/06
Date

Daytime Phone #