2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000022071

1. Entity Name

L.C. FURNEY & ASSOCIATES, INC.



FILED Feb 11, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

214 WOODLAND COURT SAFETY HARBOR, FL 34695 214 WOODLAND COURT SAFETY HARBOR, FL 34695



DO NOT WRITE IN THIS SPACE

 02062008
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

5. Name and Address of Current Registered Agent

FURNEY, LESTER C 214 WOODLAND COURT SAFETY HARBOR, FL 34695

SIGNATURE: \(\)

ATURE AND TYPED OR PRINTED N

DO NOT WRITE IN THIS SPACE

ine obligations of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	1 Agent aignature	e required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
NAME STREET ADDRESS CITY-ST-ZIP	D FURNEY, LESTER C 214 WOODLAND COURT SAFETY HARBOR, FL 34695				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000822123 02/19/08-80054-013 150.00
TITLE			1		0E/ 13/ 00 00034 013 138.00
NAME Street adoress City-St-Zip		·		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP] !		•
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 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.					

OR DIRECTOR

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