

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 12, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000082233**

1. Entity Name  
**FUREY CONSTRUCTION CONSULTANTS, INC.**



Principal Place of Business  
**3321 SW 21ST ST  
SUITE A  
FT LAUDERDALE, FL 33312**

Mailing Address  
**3321 SW 21ST ST  
SUITE A  
FT LAUDERDALE, FL 33312**

**DO NOT WRITE IN THIS SPACE**

05082006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**33-1066335**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**FILINGS, INC.  
3732 NW 16TH ST  
FT LAUDERDALE, FL 33311**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	FUREY, ANDREW P
STREET ADDRESS	3321 SW 21ST ST
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	D
NAME	FUREY, DEBRA J
STREET ADDRESS	3321 SW 21ST ST
CITY-ST-ZIP	FT LAUDERDALE, FL 33312
TITLE	SECR
NAME	FUREY, CRYSTAL M SECRETA
STREET ADDRESS	2451 ECON CIRCLE APT. 241
CITY-ST-ZIP	ORLANDO, FL 32617
TITLE	PR
NAME	FUREY, REBEKAH L PR
STREET ADDRESS	3321 SW 21 ST
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312
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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**05/09/06**  
Date

**954-347-3692**  
Daytime Phone #