

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 10, 2008 8:00 am
Secretary of State

09-10-2008 90005 001 ***450.00

DOCUMENT # P96000007013

1. Entity Name
FURY FLYER, INC.



Principal Place of Business
**201 FRONT ST, BLDG 21, SUITE 109
KEY WEST, FL 33040**

Mailing Address
**P O BOX 6446
KEY WEST, FL 33041-6446 US**

66016452



09022008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0640074

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**NORQUOY, PETER
41 FLORAL AVE
KEY WEST, FL 33040**

**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 12, 2008**

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
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
NORQUOY, PETER
41 FLORAL AVE
KEY WEST, FL 33040**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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CITY - ST - ZIP

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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

Date

Daytime Phone #

9/5/08

ATTACHMENT
SAUNDERS & COMPANY, PL
CERTIFIED PUBLIC ACCOUNTANTS

66016452

August 27, 2008

Florida Department of State
Division of Corporations
P.O. Box 8700
Tallahassee, Florida 32314

Re: Reef Explorer Corporation, Doc. #P97000036036
Fury Flyer, Inc., Doc. #P96000007013
Fury Corporation, Doc. #L99585

Dear Division of Corporations Representative:

Enclosed please find a copy of the *Notice of Intent to Dissolve* that was received for the above-referenced entities. We write this letter to request that these entities not be administratively dissolved.

Our request is based on the fact that the owner, Peter Norquoy, did indeed mail in his Annual Reports along with the required fees (Checks #1811, 1812 & 1813 each for \$150.00) dated March 17, 2008. Please note that, although the check has not yet cleared the bank, it was mailed timely to Division of Corporations. Accordingly, we have attached a duplicate payment of \$450.00.

For these reasons, we respectfully request that you accept the enclosed check to be applied so that the entities remain active. As part of your consideration, please note the owner's history of timely filed reports and payment.

Should you require additional information or have questions with regard to any of the matters addressed herein, please do not hesitate to contact me.

Sincerely,



Scott Saunders, CPA

/sas
Enclosures

412 WHITE STREET
KEY WEST, FLORIDA 33040
PHONE: 305-294-5505 • FAX: 305-294-1011