

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000026330

1. Entity Name  
CURRY CONSULTING, INC.



Principal Place of Business  
4056 KILMARTIN DRIVE  
TALLAHASSEE, FL 32308

Mailing Address  
4056 KILMARTIN DRIVE  
TALLAHASSEE, FL 32308

**FILED**  
**Jan 11, 2005 08:00 AM**  
**Secretary of State**



01072005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3569309

Applied For  
Not Applicable

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

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

GRIFFITH, JOHN R ESQ.  
HAHN, MCCLURG, WATSON, GRIFFITH & BUSH  
101 S. FLORIDA AVENUE  
LAKELAND, FL 33801

**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**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	CURRY, WILLIAM R
STREET ADDRESS	4056 KILMARTIN DR
CITY-ST-ZIP	TALLAHASSEE, FL 323308
TITLE	ST
NAME	CURRY, JUNE
STREET ADDRESS	4056 KILMARTIN DR
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000177608  
01/11/05-80053-025 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*William R. Curry - President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-2005  
Date

894-0443  
Daytime Phone #