

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 21, 2006  
Secretary of State**

DOCUMENT# N02000005337

Entity Name: C.F.S.G.A., INC.

**Current Principal Place of Business:**

1214 E ROBINSON ST  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 300365  
FERN PARK, FL 327300365

**New Mailing Address:**

FEI Number: 20-2863951      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

WHYNNOR, SANCHIA BRENNAN  
1214 E ROBINSON ST  
ORLANDO, FL 32804      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: PRONOVOSH, JANE A  
Address: PO BOX 300865  
City-St-Zip: FERN PARK, FL 32730

Title: VP      ( ) Delete  
Name: JARRELL, PATTI  
Address: PO BOX 951962  
City-St-Zip: LAKE MARY, FL 32795

Title: TD      ( ) Delete  
Name: WILLIS, DENISE Y  
Address: PO BOX 471406  
City-St-Zip: LAKE MONROE, FL 32747

Title: PD      ( ) Delete  
Name: LEONARD, BURKE H  
Address: 4901 PETRA COURT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D      ( ) Delete  
Name: CABBAGE, LORI  
Address: 635 S. WICKHAM ROAD, SUITE 204  
City-St-Zip: MELBOURNE, FL 32904

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENISE Y. WILLIS

TD

07/21/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date