

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 16, 2009  
Secretary of State**

DOCUMENT# N31111

Entity Name: F.G.H.A., INC.

**Current Principal Place of Business:**

C/O GERRY ROSE  
2007 FOREST GLEN COURT  
TALLAHASSEE, FL 32303 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 3848  
TALLAHASSEE, FL 32315 US

**New Mailing Address:**

FEI Number: 59-3129194      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROSE, GERRY B TD  
2007 FOREST GLEN COURT  
TALLAHASSEE, FL 32303 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: P ( ) Delete  
Name: CHIARO, JOSEPH  
Address: 2024FOREST GLEN COURT  
City-St-Zip: TALLAHASSEE, FL 32303

Title: TD ( ) Delete  
Name: ROSE, GERRY  
Address: 2007 FOREST GLEN CT  
City-St-Zip: TALLAHASSEE, FL 32303

Title: S ( ) Delete  
Name: ALFORD, BARBARA  
Address: 2009 FOREST GLEN CT  
City-St-Zip: TALLAHASSEE, FL 32303

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

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

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

Title: S (X) Change ( ) Addition  
Name: KRIEGER, JOSEPH  
Address: 2016 FOREST GLEN CT  
City-St-Zip: TALLAHASSEE, FL 32303

I hereby certify that the information supplied with this filing does not qualify 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: GERRY B ROSE

TD

01/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date