

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S67173

Entity Name: S.G. 9, INCORPORATED

FILED  
May 15, 2007  
Secretary of State

**Current Principal Place of Business:**

2996 9TH STREET NORTH  
ST. PETERSBURG, FL 33704

**New Principal Place of Business:**

**Current Mailing Address:**

2996 MLK ST.  
ST. PETERSBURG, FL 33704

**New Mailing Address:**

FEI Number: 59-3079164

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DANN, PHILIP W.  
540 4TH STREET NORTH  
ST. PETERSBURG, FL 33701 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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: EVERS, KAY  
Address: 8284 29TH AVE N  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VST ( ) Delete  
Name: EVERS, KAY,  
Address: 8284 29TH AVE. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: S ( ) Delete  
Name: MITCHELL, DIANA  
Address: 2580 18TH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33713

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA M. BERNARD

POA

05/15/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date