

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 512674

FILED
Mar 19, 2007
Secretary of State

Entity Name: FELGER, INCORPORATED

Current Principal Place of Business:

4020 DEL PRADO BLVD
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4020 DEL PRADO BLVD
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 59-1692174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELGER, JERRY L.
3716 SE 12TH PLACE
CAPE CORAL, FL 33904 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GUERRA, KECIA D
Address: 1311 SE 11TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: DTS () Delete
Name: FELGER, CAROL A.,
Address: 3716 S.E. 12TH PLACE
City-St-Zip: CAPE CORAL FL,

Title: D () Delete
Name: FELGER, MATTHEW
Address: 3716 SE 12TH PLACE
City-St-Zip: CAPE CORAL, FL

Title: D () Delete
Name: GUERRA, FERNANDO
Address: 1311 SE 11TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: PVPD () Delete
Name: FELGER, JERRY L
Address: 3716 SE 12TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: FELGER, ADRIENNE
Address: 3716 SE 12TH PLACE
City-St-Zip: CAPE CORAL, FL 33904

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

SIGNATURE: CAROL FELGER

DTS

03/19/2007

Electronic Signature of Signing Officer or Director

_____ Date