


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000000149 1. Entity Name PBG INVESTMENTS, INC.	
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Principal Place of Business 1285 GULF SHORE BLVD. NORTH, UNIT 3B NAPLES, FL 34102	Mailing Address C/O FOWLER WHITE BOGGS BANKER 5811 PELICAN BAY BLVD., STE. 600 NAPLES, FL 34108
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01252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2514204	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANT, GERALD JR
FOWLER WHITE BOGGS BANKER
5811 PELICAN BAY BLVD., STE. 600
NAPLES, FL 34108

**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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CPST GRANT, GERALD JR 1285 GULF SHORE BLVD. NORTH, UNIT 3B NAPLES, FL 34102

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP STOMMEL, ROBERT J C/O 5811 PELICAN BAY BLVD., STE. 600 NAPLES, FL 34108
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04/20/06-80032-010 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 lines empowered.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/06 239-598-1221
Date Daytime Phone #

Robert J. Stommel, Officer