

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000005078

Entity Name: FMGP INC.

FILED
Oct 23, 2009
Secretary of State

Current Principal Place of Business:

4801 PGA BLVD
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

TWO TOWNE SQUARE, SUITE 900
SOUTHFIELD, MI 48076

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

CUMMINGS, PETER D
4801 PGA BLVD
PALM BEACH GARDENS, FL 33418 US

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: PETER D. CUMMINGS

10/23/2009

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: CPST () Delete
Name: FISHER, PHILLIP W
Address: TWO TOWN SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change () Addition
Name: FISHER, PHILLIP W
Address: TWO TOWNE SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076

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: PHILLIP WM. FISHER

CPST

10/23/2009

Electronic Signature of Signing Officer or Director

Date