2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004761

Entity Name: FHG, INC. OF NORTH CAROLINA

FILED Jan 23, 2004 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
	HARD RIDGE DRIVE TE, NC 28227			
Current Mailing Address:		New Mailing Address	s:	
PO BOX 2 CHARLOT	3030 TE, NC 28227 US			
FEI Number	: 56-1345793 FEI Number Applied For	() FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of Current Registered Age	nt: Name and Address o	f New Registered Agent:	
1200 SOU PLANTATI The above	PORATION SYSTEM TH PINE ISLAND ROAD ION, FL 33324 US Inamed entity submits this statement for each of the statement for each of Florida.	or the purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RF.			
	Electronic Signature of Registere	ed Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	P () Delete COCKING, MARTIN A 9520 GOLDSMITH LANE CHARLOTTE, NC 28227 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete KINLEY, LYNN G 112 SUNSET CIRCLE LOCUST, NC 28097 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete WRIGHT, JAMES N 16521 BLACKBERRY HILL DRIVE MIDLAND, NC 28107 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WRIGHT, JAMES N 16521 BLACKBERRY HILL DRIVE MIDLAND, NC 28107 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T () Delete BUMGARNER, CHRISTINE 9201 MORGAN GI ENN DRIVE	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: LYNN G KINLEY S 01/23/2004

City-St-Zip: CHARLOTTE, NC 28227 US