

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004761

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: FHG, INC. OF NORTH CAROLINA

**Current Principal Place of Business:**

6809 ORCHARD RIDGE DRIVE  
CHARLOTTE, NC 28227 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 23030  
CHARLOTTE, NC 28227 US

**New Mailing Address:**

FEI Number: 56-1345793      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: S ( ) Delete  
Name: KINLEY, LYNN G  
Address: 112 SUNSET CIRCLE  
City-St-Zip: LOCUST, NC 28097 US

Title: P ( ) Delete  
Name: WRIGHT, JAMES N  
Address: 1242 MILL RIGHT LANE  
City-St-Zip: MATTHEWS, NC 28104 US

Title: D ( ) Delete  
Name: WRIGHT, JAMES N  
Address: 1242 MILL RIGHT LANE  
City-St-Zip: MATTHEWS, NC 28104 US

Title: T ( ) Delete  
Name: BUMGARNER, CHRISTINE P  
Address: 9201 MORGAN GLENN DRIVE  
City-St-Zip: CHARLOTTE, NC 28227 US

**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  
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: LYNN G. KINLEY

S

04/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date