## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G21343

**Entity Name:** F.G.R. INCORPORATED

FILED May 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1111 S LAKEMONT AVE 1013 LAKEMONT CIRCLE #303 WINTER PARK, FL 32792

WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

1111 S LAKEMONT AVE #303 WINTER PARK, FL 32792

FEI Number: 59-2259364 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BROWN, SONDRA G
1111 S LAKEMONT AVE
1102
1111 S LAKEMONT AVE

#303 #303

WINTER PARK, FL 32792 US WINTER PARK, FL 32792 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: SONDRA G. BRAUN 05/24/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT ( ) Delete Title: PDT (X) Change ( ) Addition

 Name:
 BRAUN, SONDRA G
 Name:
 BRAUN, SONDRA G

 Address:
 3717 CAPETOWN DR
 Address:
 1111 S. LAKEMONT AVE. #303

 City-St-Zip:
 ORLANDO, FL 328171501
 City-St-Zip:
 WINTER PARK, FL 327925470

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MAPES, DAVID S
 Name:

 Address:
 872 RIVER ROAD
 Address:

 City-St-Zip:
 MADISON HTS., VA 245729717
 City-St-Zip:

Title: S ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BLUME, DIANÉ E
 Name:

 Address:
 148 JOEL DRIVE
 Address:

 City-St-Zip:
 HEBRON, CT 062481263
 City-St-Zip:

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 MAPES, DANIÉL P
 Name:
 MAPES, DANIÉL P

 Address:
 7265 GATESHEAD CIRCLE APT 7
 Address:
 772 COACHLIGHT DRIVE

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:
 FERN PARK, FL 32730

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: SONDRA G. BRAUN PDT 05/24/2006