2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H21876

Entity Name: T.G.A. ENTERPRISES, INC.

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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1552 ATARES DR #112 1552 ATARES DR #112

PUNTA GORDA, FL 33950 PUNTA GORDA, FL 339508569 US

Current Mailing Address: New Mailing Address:

PO BOX 511776

PUNTA GORDA, FL 339511776

FEI Number: 59-2533989 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:

GUGLIELMINO, MARY FIORINI J GUGLIELMINO, MARY FIORINI J

1552 ATARES DR. 1552 ATARES DR.

PUNTA GORDA, FL 339503850 US PUNTA GORDA, FL 339508569 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: MARY J. FIORINI GUGLIELMINO 01/12/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FIORINI GUGLIELMINO, MARY J GUGLIELMINO, MARY FIORINI J Name: Name: 1552 ATARES DR., #112 1552 ATARES DR., #112 Address: Address: City-St-Zip: PUNTA GORDA, FL 339503850 City-St-Zip: PUNTA GORDA, FL 339508569

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

WHIPPLE, SUSAN WHIPPLE, SUSAN Name: Name: 4128 SANTA BARBARA BLVD UNIT 2 1425 SW 51ST LANE Address: Address: CAPE CORAL, FL CAPE CORAL, FL 33914 City-St-Zip: City-St-Zip:

Title: Title: VΡ () Delete () Change () Addition

FIORINI, JOSEPH E Name: Name: 12153 MINNESOTA AVE Address: Address: City-St-Zip: PUNTA GORDA, FL 33955 City-St-Zip:

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: MARY J. GUGLIELMINO **PRES** 01/12/2009