

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # L04980	
1. Entity Name FIRST EQUITY DEVELOPMENT GROUP, INC.	
	
Principal Place of Business % W. ROGER SMITH 5300 S ORANGE AVE. ORLANDO, FL 32809	Mailing Address % W. ROGER SMITH 5300 S ORANGE AVE. ORLANDO, FL 32809



01212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2971303	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**SMITH, W. ROGER
5300 S ORANGE AVE.
ORLANDO, FL 32809**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE
02/12/08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

02/12/08-80046-005 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HARRELL, ROBERT S.
STREET ADDRESS	5300 S ORANGE AVE
CITY-ST-ZIP	ORLANDO, FL 32809

TITLE	D
NAME	SMITH, W. ROGER
STREET ADDRESS	5300 SOUTH ORANGE AVE
CITY-ST-ZIP	ORLANDO, FL 32809

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/08 4078592001
Date Daytime Phone #