2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 15, 2007
Secretary of State

DOCUMENT# L06000050411

Entity Name: FGH LLC

Current Principal Place of Business:

19 FALCONWOOD COURT
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

19 FALCONWOOD COURT
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 20-5390295 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

R & A AGENTS, INC.
850 PARK SHORE DRIVE
THIRD FLOOR
NAPLES, FL 34103 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

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: HAFELE, DALE G
Address: 19 FALCONWOOD CT
City-St-Zip: FT MYERS, FL 33919

Title: MGRM ( ) Change (X) Addition
Name: FIORILLO, WILLIAM S
Address: 6881 LAKE DEVONWOOD DR
City-St-Zip: FT MYERS, FL 33916

Title: MGRM ( ) Change (X) Addition
Name: GIBSON, JOHN D
Address: 15891 DORTH CIRCLE
City-St-Zip: FT. MYERS, FL 33908

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DALE HAFELE MGRM 06/15/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date