2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007429

Entity Name: PGC FOUNDATION INC.

FILED Feb 22, 2005 Secretary of State

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

4020 58TH AVE., N. **SUITE 3968**

ST. PETERSBURG, FL 33714 US

New Mailing Address: Current Mailing Address:

4020 58TH AVE., N. P.O. BOX 1361

SUITE 3968 GULFPORT, MS 39502 US

ST. PETERSBURG, FL 33714 US

FEI Number: 20-1443276 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:

MACINTOSH, THOMAS 4020 58TH AVE., N. **SUITE 3968**

ST. PETERSBURG, FL 33714 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MACINTOSH, THOMAS MACINTOSH, THOMAS Name: Name: 4020 58TH AVE., N., SUITE 3968 Address: 2255 SWITZER RD., # G-208 Address: City-St-Zip: ST. PETERSBURG, FL 33714 US City-St-Zip: GULFPORT, MS 39507 US

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

Name: SCHOMER, JASON Name: SCHOMER, JASON Address: 4020 58TH AVE., N., SUITE 3968 Address: 1700 W. GUNN RD

City-St-Zip: ST. PETERSBURG, FL 33714 US City-St-Zip: ROCHESTER HILLS, MI 48307 US

Title: TRE () Delete Title: () Change () Addition

WILLIAMS, MARK Name: Name: 4020 58TH AVE., N., SUITE 3968 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33714 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS MACINTOSH **PRES** 02/22/2005