


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 19, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000107072	
1. Entity Name PEG, INC.	

Principal Place of Business 9433 BEARFOOT TRAIL WEEKI WACHEE, FL 34613	Mailing Address 9433 BEARFOOT TRAIL WEEKI WACHEE, FL 34613
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07062007 No Chg-P CR2E034 (11/05)

4. FEI Number 61-1459749	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  JOHNSTON, DARRYL W 29 S BROOKSVILLE AVE BROOKSVILLE, FL 34601
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GANGAROSA, ROSE 5303 GREENCASTLE WAY STONE MOUNTAIN, GA 30087
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GANGAROSA, MARGARET A 9433 BEARFOOT TRAIL WEEKI WACHEE, FL 34613
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/19/07-80007-025 150.00

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: <i>Margaret A. Gangarosa</i>	Date: 7/16/07	Daytime Phone #: 352-592-5143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		