

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136016

FILED  
Jan 31, 2005  
Secretary of State

Entity Name: FOX MANAGEMENT GROUP, INC.

## Current Principal Place of Business:

10650 WINGATE ROAD  
JACKSONVILLE, FL 32218 45

## New Principal Place of Business:

10650 WINGATE ROAD  
JACKSONVILLE, FL 32218

## Current Mailing Address:

10650 WINGATE ROAD  
JACKSONVILLE, FL 32218

## New Mailing Address:

FEI Number: 73-1685848      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RENARD, PEEPLES  
10650 WINGATE ROAD  
JACKSONVILLE, FL 32218 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: RENARD, PEEPLES  
Address: 10650 WINGATE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP ( ) Delete  
Name: RENARD, PEEPLES  
Address: 10650 WINGATE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: TREA ( ) Delete  
Name: RENARD, PEEPLES  
Address: 10650 WINGATE ROAD  
City-St-Zip: JACKSONVILLE,, FL 32218

Title: SEC ( ) Delete  
Name: RENARD, PEEPLES  
Address: 10650 WINGATE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CEO ( ) Change (X) Addition  
Name: PEEPLES, RENARD  
Address: 10650 WINGATE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENARD PEEPLES

PRES

01/31/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date