

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000152729

Entity Name: CGP MANAGEMENT, INC.

FILED
Jan 15, 2007
Secretary of State

Current Principal Place of Business:

131 N. HIDDENBROOKE DRIVE
ADVANCE, NC 27006

New Principal Place of Business:

Current Mailing Address:

131 N. HIDDENBROOKE DRIVE
ADVANCE, NC 27006

New Mailing Address:

FEI Number: 20-0495258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAJEK, MICHAEL W III
5308 CENTRAL AVENUE
ST. PETERSBURG, FL 33707 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: P () Delete
Name: POPPE, BRIAN J
Address: 131 N. HIDDENBROOKE DRIVE
City-St-Zip: ADVANCE, NC 27006

Title: VP () Delete
Name: POPPE, LYNNE
Address: 131 N. HIDDENBROOK DR.
City-St-Zip: ADVANCE, NC 27006 72

Title: SEC () Delete
Name: POPPE, CHRISTINE
Address: 131 N. HIDDENBROOK
City-St-Zip: ADVANCE, NC 27006

Title: TRES () Delete
Name: POPPE, CRAIG
Address: 131 N. HIDDENBROOK
City-St-Zip: ADVANCE, NC 27006

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LYNNE POPPE

VP

01/15/2007

Electronic Signature of Signing Officer or Director

_____ Date