

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000142552

Entity Name: PHL GROUP, INC.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

10347 CROSS CREEK SUITE H
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

10347 CROSS CREEK SUITE H
TAMPA, FL 33647

New Mailing Address:

FEI Number: 20-1721936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIZE, JASON
17518 PRESERVE WALK LANE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

MIZE, JASON
10347 CROSS CREEK BLVD.
SUITE G
TAMPA, FL 33647 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: JASON MIZE

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MIZE, JASON
Address: 17518 PRESERVE WALK LANE
City-St-Zip: TAMPA, FL 33647

Title: V () Delete
Name: THOMASON, CORY
Address: 10348 CROSS CREEK SUITE H
City-St-Zip: TAMPA, FL 33647

Title: V () Delete
Name: HOFFMAN, JEFFERY
Address: 18912 NEST FERN CIR
City-St-Zip: TAMPA, FL 33647

Title: V () Delete
Name: BRADY, JOHN
Address: 345 BAYSHORE BLVD #904
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MIZE, JASON
Address: 10347 CROSS CREEK BLVD. STE. G
City-St-Zip: TAMPA, FL 33647

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

Title: V (X) Change () Addition
Name: HOFFMAN, JEFFERY
Address: 18101 HIGHWOODS PRESERVE PARKWAY, STE 110
City-St-Zip: TAMPA, FL 33647

Title: V (X) Change () Addition
Name: BRADY, JOHN
Address: 514 FRANKLIN STREET
City-St-Zip: TAMPA, FL 33602

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 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: JASON MIZE

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date