2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160264

Address:

P.O.BOX 395

City-St-Zip: BUNNELL, FL 32110

Entity Name: FIRST NATIONAL EQUITY GROUP, INC.

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
ATRIUM S	A PARK DRIVE SUITE AST, FL 32137			
Current Mailing Address:			New Mailing Address:	
ATRIUM S	A PARK DRIVE SUITE AST, FL 32137			
FEI Number	: 20-1929651	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:	
ATRIUM S PALM CO. The above	A PARK DRIVE SUITE AST, FL 32137 named entitys	US	purpose of changing its registere	ed office or registered agent, or both
	e of Florida. 			
SIGNATU		ic Signature of Registered Ac	ront	 Date
Election Ca		g Trust Fund Contribution ().	geni	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	KATZ, B. PAUL	Delete RK DR SPUTH,ATRIUM FL 32137	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPD () KATZ, SIMON E 148 BIRCHWO PALM COAST,	OD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VPD () MULLIGAN, MIO 3705 NW 130TI OCALA, FL 344	H AVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	UZSINAY, YOS	RK DRIVE SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition
	D ()	Delete	Title:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: B. PAUL KATZ PD 04/16/2008