

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 25, 2007 08:00 AM
Secretary of State**

DOCUMENT # P05000014324

1. Entity Name
FEPGP, INC.



Principal Place of Business
809 NW GREENWICH CT
PORT SAINT LUCIE, FL 34983

Mailing Address
809 NW GREENWICH CT
PORT SAINT LUCIE, FL 34983



04232007 No Chg-P CR2E034 (11/05)

4. FEI Number 51-0534825	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PETRUFF, PHYLLIS
809 NW GREENWICH COURT
PORT ST. LUCIE, FL 34983

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

U00000729154
05/08/07-80029-015 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PETRUFF, GEORGE L 809 NW GREENWICH CT PORT SAINT LUCIE, FL 34983
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PETRUFF, PHYLLIS 809 NW GREENWICH CT PORT SAINT LUCIE, FL 34983
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

George L. Petruff
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/07 772-878-7255
Date Daytime Phone #