## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000021061

LARSON, BRIAN A

2950 INDUSTRIAL ROAD

LAS VEGAS, NV 89109

Name: Address:

City-St-Zip:

Entity Name: FGB DEVELOPMENT, INC.

**FILED** Apr 16, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2 SOUTH BISCAYNE BLVD. SUITE 3400 MIAMI, FL 33131 **Current Mailing Address: New Mailing Address:** 2 SOUTH BISCAYNE BLVD. SUITE 3400 MIAMI, FL 33131 FEI Number: 20-2310247 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: GY CORPORATE SERVICES, INC 2 SOUTH BISCAYNE BLVD. SUITE 3400 ONE BISCAYNE TOWER MIAMI, FL 33131 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition BOYD, WILLIAM S Name: Name: 2950 INDUSTRIAL ROAD Address: Address: City-St-Zip: LAS VEGAS, NV 89109 City-St-Zip: Title: DEVP Title: ( ) Delete () Change () Addition Name: SMITH. KEITH E Name: 2950 INDUSTRIAL ROAD Address: Address: LAS VEGAS, NV 89109 City-St-Zip: City-St-Zip: Title: (X) Change ( ) Addition Title: SVP ( ) Delete SVP CHAKRRAK, PAUL E CHAKMAK, PAUL J Name: Name: 2950 INDUSTRIAL ROAD 2950 INDUSTRIAL ROAD Address: Address: City-St-Zip: LAS VEGAS, NV 89109 City-St-Zip: LAS VEGAS, NV 89109 Title: SVPS ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BRIAN A. LARSON **SVPS** 04/16/2007