

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 07, 2007 8:00 am
Secretary of State

06-07-2007 90003 019 ***158.75

DOCUMENT # P05000039061

1. Entity Name
RG FLORIDA GC, INC.



Principal Place of Business
1507 CAPITAL AVENUE
SUITE 101
PLANO, TX 75074 US

Mailing Address
1507 CAPITAL AVENUE
SUITE 101
PLANO, TX 75074 US

DO NOT WRITE IN THIS SPACE



05302007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-2793108

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MITCHELL, WILLIAM R
125 SOUTH ALCANIZ STREET
SUITE 1
PENSACOLA, FL 32502

**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
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE P
NAME REA, JAMES
STREET ADDRESS ~~644 QUAIL LANE~~ 1507 Capital Ave. #101
CITY-ST-ZIP CORPELL, TX 75040 Plano, Texas 75074

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/31/07

Date

Daytime Phone #

972-915-4774