

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082606

Entity Name: TCG ENTERPRISES INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

802 CAMPBELL AVE
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

802 CAMPBELL AVE
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 55-0898517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FISHER, MICHAEL
802 CAMPBELL AVE
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

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:

Title: PRES () Delete
Name: HENRIKSON, NATHANIEL
Address: 1404 LAKEVIEW RD.
City-St-Zip: LAKE WALES, FL 33853

Title: V-PR () Delete
Name: FISHER, MICHAEL
Address: 802 CAMPBELL AVE
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MICHAEL E FISHER

VP

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date