

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098151

Entity Name: FCFG PARTNERS, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

8250 BRYAN DAIRY RD SUITE 200  
LARGO, FL 33777

## New Principal Place of Business:

## Current Mailing Address:

8250 BRYAN DAIRY RD SUITE 200  
LARGO, FL 33777

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERMAN, ARTHUR L  
8250 BRYAN DAIRY RD SUITE 200  
LARGO, FL 33777 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: D ( ) Delete  
Name: BERMAN, ARTHUR L  
Address: 8250 BRYAN DAIRY RD SUITE 200  
City-St-Zip: LARGO, FL 33777

Title: D ( ) Delete  
Name: HALLGREN, SCOTT E  
Address: 8250 BRYAN DAIRY RD SUITE 200  
City-St-Zip: LARGO, FL 33777

Title: S ( ) Delete  
Name: SCHULMAN, MICHAEL I  
Address: 8250 BRYAN DAIRY RD SUITE 200  
City-St-Zip: LARGO, FL 33777

Title: D ( ) Delete  
Name: BELJIC, STEVEN  
Address: 8250 BRYAN DAIRY RD SUITE 200  
City-St-Zip: LARGO, FL 33777

Title: T ( ) Delete  
Name: KUDELKO, MARC  
Address: 8250 BRYAN DAIRY RD STE 200  
City-St-Zip: LARGO, FL 33777

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MELISSA LAHMEYER

GM

04/20/2009

Electronic Signature of Signing Officer or Director

Date