## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000067703

STEPHENS, ADAMS

5602 TURKEY ROAD

PENSACOLA, FL 32526

Name:

Address:

City-St-Zip:

FILED Mar 30, 2009 Secretary of State

Entity Nar	me: SUBS GF	ROUP, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
82 E. NINE MILE RD. PENSACOLA, FL 32534 US			1928 GREENBRIER BLVD PENSACOLA, FL 32514 US		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 70 PENSACC	025 DLA, FL 32534	US			
FEI Number:	: 20-4926289	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
HICKEY, RAYMOND G 913 GULF BREEZE PARKWAY 5				NOEL, RAYMOND A 1928 GREENBRIER BLVD PENSACOLA, FL 32514 US	
GULF BRE	EEZE, FL 3256	S1 US	,		
	named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: RAYMOND A. NOEL				03/30/2009	
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () NOEL, RAYMOI 1928 GREENBI CANTONMENT,	RIER BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (X) BUSH, RICHAR 4004 BAYWOO PENSACOLA, F	DS DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) MATHIS, WILLI 2105 OAKSCRI PENSACOLA, F	EAN AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D (X)	. Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RAYMOND A. NOEL **PRES** 03/30/2009