

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000111660

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: FIRST GENERATION INVESTMENT, INC.

## Current Principal Place of Business:

3192 S JOHN YOUNG PARKWAY, STE A  
KISSIMMEE, FL 34746 US

## New Principal Place of Business:

2561 E IRLO BRONSON HWY  
KISSIMMEE, FL 34744 US

## Current Mailing Address:

1106 OLD HARBOR DRIVE  
CLIFTON PARK, NY 12065 US

## New Mailing Address:

FEI Number: 26-1214953      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAUNDERS, BART R ESQ.  
7232 W SAND LAKE RD  
SUITE 202  
ORLANDO, FL 32819 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

## OFFICERS AND DIRECTORS:

Title: P, T ( ) Delete  
Name: WHALEN, BARBARA  
Address: 3192 S JOHN YOUNG PKWY, SUITE A  
City-St-Zip: KISSIMMEE, FL 34946 US

Title: VP ( ) Delete  
Name: WHALEN, TIMOTHY  
Address: 3192 S JOHN YOUNG PKWY, SUITE A  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP ( ) Delete  
Name: KNAPP, RICHARD E  
Address: 3192 S JOHN YOUNG PKWY, SUITE A  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP (X) Delete  
Name: PARR, WILLIAM P  
Address: 3192 S JOHN YOUNG PKWY, SUITE A  
City-St-Zip: KISSIMMEE, FL 34746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition  
Name: PARR, WILLIAM E  
Address: 2561 E IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 34744 US

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: BARBARA H WHALEN

PRES

04/06/2009

Electronic Signature of Signing Officer or Director

Date