2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P08000098477

Entity Name: FGE MANAGER, INC.

Current Principal Place of Business:

4801 PGA BLVA
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

4801 PGA BLVD
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

4801 PGA BLVA
PALM BEACH GARDENS, FL 33418

New Mailing Address:

4801 PGA BLVD
PALM BEACH GARDENS, FL 33418

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

CUMMINGS, PETER D
4801 PGA BLVD
PALM BEACH GARDENS, FL 33418 US

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: PETER D. CUMMINGS 04/30/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Change (X) Addition
Name: FISHER, MARJORIE M
Address: TWO TOWNE SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076 US

Title: VP ( ) Change (X) Addition
Name: CUMMINGS, JULIE F
Address: TWO TOWNE SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076 US

Title: VP ( ) Change (X) Addition
Name: FISHER, MARY D
Address: TWO TOWNE SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076 US

Title: VP ( ) Change (X) Addition
Name: FISHER, PHILLIP W
Address: TWO TOWNE SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076 US

Title: SEC ( ) Change (X) Addition
Name: SHERMAN, JANE F
Address: TWO TOWNE SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076 US

Title: A.S. ( ) Change (X) Addition
Name: CALVANO, CATHERINE A
Address: TWO TOWNE SQUARE SUITE 900
City-St-Zip: SOUTHFIELD, MI 48076 US

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: CATHERINE A. CALVANO A.S. 04/30/2009
Electronic Signature of Signing Officer or Director Date