

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P22003	
1. Entity Name C&G MANAGEMENT COMPANY, INC.	
A 150.00	



FILED
06 APR 28 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 701 HARGER RD STE 190 OAK BROOK, IL 60523 US	Mailing Address 701 HARGER RD STE 190 OAK BROOK, IL 60523 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04052006 Chg-P CR2E034 (11/05) 06

4. FEI Number 36-3609057	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SOUTHERN BAKERIES INC ATTN: ARTHUR KRANTZ 3355 W MEMORIAL BLVD. LAKELAND, FL 33801	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KELLY, DONALD P 701 HARGER RD STE 190 OAK BROOK, IL 60523 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GUSTAFSON, EDWARD F 701 HARGER RD STE 190 OAK BROOK, IL 60523 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS SCHUSTER, STEPHEN M 701 HARGER RD STE 190 OAK BROOK, IL 60523 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAURA K. MCGRATH 701 HARGER RD. OAK BROOK, IL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Patrick J. Kelly 701 Harger Rd, Ste 190 OakBrook, IL 60523 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomas N. Kelly 701 Harger Rd. Ste 190 Oak Brook, IL 60523 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D F. Edward Gustafson, II 1335 Ridgeland Parkway, Ste 120 Alpharetta GA, 30004 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500074327065 05/10/06--01012--002 **1250.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen M. Schuster Stephen M. Schuster, Secretary 12 APR 06 630-575-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #