FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -2 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000017165 (0)**

1. Corporation Name

PFGI, INC.

Principal Place of Business	Mailing Address
1500 APALACHEE PKWY. TRADE SECRETS STORE. GOV. SQUARE MALL TALLAHASSEE FL 32301	1500 APALACHEE PKWY. TRADE SECRETS STORE. GOV. SQUARE MALL TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/02/1993
3a. Date of Last Report: 03/30/1994

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

4. FEI Number: 59-3160808 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be *Added to Fees*

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

PATZ, AARON
1500 APALACHEE PKWY.
TRADE SECRETS STORE, GOV. SQUARE MALL
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P	☒ Change ☐ Addition
NAME	NELSON, PATZ	1.2 NAME	Patz, Nelson	
STREET ADDRESS	4812 HORSE HILL RD.	1.3 STREET ADDRESS	6247 Heartland Circle	
CITY-ST-ZIP	BALTIMORE MD	1.4 CITY-ST-ZIP	Tallahassee FL 32312	
TITLE	VP	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	PATZ, MARY ANN	2.2 NAME	Patz, Mary Ann	
STREET ADDRESS	4812 HORSE HILL RD.	2.3 STREET ADDRESS	6247 Heartland Circle	
CITY-ST-ZIP	BALTIMORE MD	2.4 CITY-ST-ZIP	Tallahassee, FL 32312	
TITLE	VP	3.1 TITLE		☐ Change ☐ Addition
NAME	PATZ, AARON	3.2 NAME		
STREET ADDRESS	1555 DELANEY DR., 1016	3.3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	3.4 CITY-ST-ZIP		
TITLE	VP	4.1 TITLE	VP	☒ Change ☐ Addition
NAME	PATZ, MOLLIE M.	4.2 NAME	Patz, Mollie	
STREET ADDRESS	4812 HORSE HILL RD.	4.3 STREET ADDRESS	6247 Heartland Circle	
CITY-ST-ZIP	BALTIMORE MD	4.4 CITY-ST-ZIP	Tallahassee, FL 32312	
TITLE	VP	5.1 TITLE	VP	☒ Change ☐ Addition
NAME	PATZ, JULIA	5.2 NAME	Patz, Julia	
STREET ADDRESS	4812 HORSE HILL ROAD	5.3 STREET ADDRESS	6247 Heartland Circle	
CITY-ST-ZIP	BALTIMORE MD	5.4 CITY-ST-ZIP	Tallahassee, FL 32312	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nelson C. Patz NELSON C. PATZ 2/28/95 (904) 894-2124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0026001 CP