

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000083915

Entity Name: FIRSTGROUP AMERICA, INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

705 CENTRAL AVE
STE 500
CINCINNATI, OH 45202

New Principal Place of Business:

Current Mailing Address:

705 CENTRAL AVE
STE 500
CINCINNATI, OH 45202

New Mailing Address:

FEI Number: 65-0545137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CSC
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: LYSKAWA, E. BRUCE
Address: 705 CENTRAL AVE STE 500
City-St-Zip: CINCINNATI, OH 45202

Title: PD () Delete
Name: BALLARD, BRUCE
Address: 705 CENTRAL AVE STE 500
City-St-Zip: CINCINNATI, OH 45202

Title: SD () Delete
Name: MURRAY, MICHAEL
Address: 705 CENTRAL AVE STE 500
City-St-Zip: CINCINNATI, OH 45202

Title: T () Delete
Name: KEVIN, COOPER
Address: 705 CENTRAL AVE, SUITE #500
City-St-Zip: CINCINNATI, OH 45202

Title: AT () Delete
Name: BRIAN, BEECHEM
Address: 705 CENTRAL AVE, SUITE #500
City-St-Zip: CINCINNATI, OH 45202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T (X) Change () Addition
Name: ALTON, SLOAN
Address: 705 CENTRAL AVE, SUITE #500
City-St-Zip: CINCINNATI, OH 45202

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN BEECHEM

AT

04/21/2005

Electronic Signature of Signing Officer or Director

_____ Date