2007 FOR PROFIT CORPORATION. **ANNUAL REPORT**

DOCUMENT # P94000037920

1. Entity Name F.W.G., INC.



FILED Apr 12, 2007 08:00 A Secretary of State

Principal Place of Business

11420 FORTUNE CIRCLE

STE 1-24

WELLINGTON, FL 33414

Mailing Address

11420 FORTUNE CIR

SUITE 1-24

WELLINGTON, FL 33414 US



DO NOT WRITE IN THIS SPACE

04092007 No Cha-P

CR2E034 (11/05)

Applied For

4. FEI Number 65-0493003

Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

WITRY, SHARON L 11420 FORTUNE CIRCLE STE I-24 WEST PALM EBAHC, FL 33414

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8. The above named entity submits this statement for the purpose of char	ging 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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U000000701943 /20/07-80079-002..150..00

OFFICERS AND DIRECTORS 10. TITLE NAME WITRY, CATHERINE A STREET ADDRESS 11420 FORTUNE CIR I-24 CITY-ST-ZIP WELLINGTON, FL TITLE NAME WITRY, SHARON STREET ADDRESS 11420 FORTUNE CIR I-24 CITY-ST-ZIP WELLINGTON, FL TITLE WITRY, JOSEPH D NAME STREET ADDRESS 11420 FORTUNE CIR I-24 CITY-ST-ZIP WELLINGTON, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF