

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008 08:00 AM
Secretary of State

DOCUMENT # P94000037920

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



Principal Place of Business

11420 FORTUNE CIRCLE
STE I-24
WELLINGTON, FL 33414 US

Mailing Address

11420 FORTUNE CIR
SUITE I-24
WELLINGTON, FL 33414 US



01212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0493003	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

NEW FEE IS \$150.00
2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICER WITRY, CATHERINE A 11420 FORTUNE CIR I-24 WELLINGTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR WITRY, SHARON 11420 FORTUNE CIR I-24 WELLINGTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICER WITRY, JOSEPH D 11420 FORTUNE CIR I-24 WELLINGTON, FL
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03/21/08-80018-008 150.00

**DO NOT WRITE
IN THIS SPACE**

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 OFFICER OR DIRECTOR

Date

Daytime Phone

Sharon L. Witry
1/24/08