

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000077451

Entity Name: FIRST EQUITY GROUP, INC.

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

20283 STATE ROAD 7  
300  
BOCA RATON, FL 33498 US

## New Principal Place of Business:

## Current Mailing Address:

110 COVERIDGE LANE  
LONGWOOD, FL 32779 US

## New Mailing Address:

FEI Number: 65-0530092      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAKER, DOUGLAS  
110 COVERIDGE LANE  
LONGWOOD, FL 32779 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: DPT ( ) Delete  
Name: ALONZO, MARCO D  
Address: 20283 STATE ROAD 7  
City-St-Zip: BOCA RATON, FL 33064

Title: DSVP ( ) Delete  
Name: BAKER, DOUGLAS R  
Address: 110 COVERIDGE LN  
City-St-Zip: LONGWOOG, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DOUGLAS BAKER

VP

03/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date