FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000019755 (3)

FG8G MANAGEMENT GROUP, INC.

GunnAllen Management Group, Inc

12-24-97

FILED May 14 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Addre	ess				····		
1715 N. WESTSHORE BLVD 1715 N. WESTSHOR			TSHORE BLVD	BLVD					
SUITE 775		SUITE 775	SUITE 775			DO NOT INDITE IN TURO OD OF			
TAMPA FL 33	1607	TAMPA FL 33	907			DO NOT WRITE I 3. Date Incorporated or Qualified	IN THIS SPACE		
İ						'			
2. Principal F	Place of Business	2a. Mailing Ad	Idraes			03/01/1996 4. FEI Number		Applied For	
21	100 0. Daoine 00	26	10.035			Į.	-	Applied For Not Applicable	
Suite, Apt.	#. etc.	Suite, Apt.	#. etc.	····		59-3362484		75 Additional	
22	,	27	.,			Certificate of Status Desired	1 1 '	ee Regulred	
City & Stat	le	City & Star	0			6. Election Campaign Financing	···	.00 May Be	
3		28	28			,	Trust Fund Contribution Added to Fees		
Z ip	Country			Country		8. This corporation owes or has paid			
24	25	29	30			Personal Property Tax due June 3		□ No	
	g. Name and Address of Cu	rrent Registered Agen	t	\prod		10. Name and Address of New Reg	stered Agent		
FR	UEH, RICHARD A			81	Name				
	15 N. WESTSHORE BLVD			82	Ctroct	Address (D.O. Poy Alumber in Not Assessed	· · · · · · · · · · · · · · · · · · ·		
	TE 775			62	Street	Address (P.O. Box Number is Not Acceptable	7)		
	MPA FL 33607			83					
	W 74 1 C 00007			_					
				84	City		FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607 1508. Fig	orida Statutes, the	above	l e-named	corporation submits this statement for the pu	rpose of chance	ing its registered	
office or r	registered agent, or both, in the S	tate of Florida. Such ch	ange was authoriz	ed by	the cor	poration's board of directors. I hereby accept	the appointme	nt as registered	
-	in igniniai with, and accept the or	ongations of Section of	77.0305, Fiorida Si	iaiules	S.				
SIGNATURE	Signature, typed or pricted name of registeria	d agent and the diappt rable	(NOTE: Registre	and Age	ent signature	e required when reinstating)	DATE		
12.	OFFICERS	AND DIRECTORS	13	3.		ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	CTORS IN 12	
TITLE	PSTD		DELETE 11	TITLE			Cha	ange Addition	
NAME	FRUEH, RICHARD A		12	NAME					
STREET ADDRESS	1715 N. WESTSHORE BLV	D., SUITE 775	1.3	STREET	ADDRESS				
CITY-ST-ZIP	TAMPA FL 33607	-,	1.4	CITY-S	I - ZIP				
TITLE			~ ~~	TITLE			☐ Chi	ange	
NAME			2.2	NAME					
STREET ADDRESS			2.3	STREET	ADDRESS				
CITY-ST-ZIP				CITY-			g. a		
TITLE				TITLE			Cha	ange Addition	
NAME				NAME					
STREET ADDRESS			•		ADDRESS				
CITY-ST-ZIP				CITY-S					
TITLE				TITLE			Cha	inge Addition	
NAME		-		NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CHY-S					
TALE	······································	П		TITLE	T- CIF	,	Cha	inge	
NAME				NAME		300002528	3:57:3		
STREET ADDRESS					ADDDECC		014	İ	
l					ADDRESS	***150.00	- ,		
CITY-ST-ZIP TITLE	·			CITY-S	1-202		Пль	nod I delition	
!				TITLE			∟ Cha	ing	
NAME OTOTET ADDRESS				NAME			1	1 /4	
STREET ADDRESS					ADDRESS		`	/ 0/.	
CITY-ST-ZIP			6.4	CITY-S	T-ZIP			3 -	

14. I hereby certify that the information supplied with this filing 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 chapter, open an alphabring with an address.