2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 16, 2005 08:00 AM Secretary of State DOCUMENT # P96000099647 1. Entity Name PFG HOLDING, INC. Principal Place of Business Mailing Address 12500 WEST CREEK PARKWAY 3015 N GALLAGHER RD RICHMOND, VA 23238 SUITE 500 DOVER, FL 33527 US 02222005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3414474 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 1100000265222 FILE NOW!!! FEE 19 \$150.00 9. Election Campaign Financing \$5.00 May Be 03/16/05-60045-023 150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PDC TITLE SLEDD, ROBERT C NAME 12500 WEST CREEK PKWY STREET ADDRESS CITY-ST-ZIP RICHMOND, VA 23238 TITLE VS. DUET, NATHAN P NAME 12500 WEST CREEK PKWY STREET ADDRESS RICHMOND, VA 23238 CITY-ST-ZIP VD TITLE AUSTIN, JOHN NAME STREET ADDRESS 12500 WEST CREEK PKWY DO NOT WRITE CITY-ST-ZIP RICHMOND, VA 23238 IN THIS SPACE FENDER, JEFFERY W NAME 12500 WEST CREEK PKWY STREET ADDRESS CITY-ST-ZIP RICHMOND, VA 23238 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify 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 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 TIPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-05

204-484-7702

Daytime Phone #

FILED