


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 25, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S74971</b>	
1. Entity Name PSG ENTERPRISES, INC.	
	
Principal Place of Business 5186 COMMERCIAL WAY SPRING HILL, FL 34606-1931 US	Mailing Address 9557 BEARFOOT TRAIL BROOKSVILLE, FL 34613



01042008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3084464	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

BRUMETT, PINE M.  
9557 BEARFOOT TRAIL  
BROOKSVILLE, FL 34613

**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

000000838766

03/05/08 00043 014 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BRUMETT, SCOTT T 9557 BEARFOOT TRAIL BROOKSVILLE, FL 34613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RICHARDS, MARY ANN 1441 BISHOP ROAD SPRING HILL, FL 34608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRUMETT, PINE M 9557 BEARFOOT TRAIL BROOKSVILLE, FL 34613
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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 persons empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 21, 2008

Date

Daytime Phone #

352-597-1095

MARY ANN RICHARDS