2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 338929

Entity Name: FLECHBILT INC

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1927 S.W. COLLEGE ROAD OCALA, FL 344711619 US

Current Mailing Address: New Mailing Address:

1927 S.W. COLLEGE ROAD OCALA, FL 344711619 US

FEI Number: 59-1228725 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLECHAS, MYRTLE D FLECHAS, MYRTLE D 1927 S.W. COLLEGE ROAD 1927 S.W. COLLEGE ROAD OCALA, FL 32674 OCALA, FL 34471

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: MYRTLE D FLECHAS 04/17/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FLECHAS, MYRTLE D FLECHAS, ALFRED J JR Name: Name: 1927 SW COLLEGE RD 1927 SW COLLEGE RD Address: Address: City-St-Zip:

OCALA, FL 34474 City-St-Zip: OCALA, FL 34471

2VP Title: VΡ Title: () Delete (X) Change () Addition FLECHAS, EUGENE D Name: FLECHAS, EUGENE D Name: 1828 NE 12TH AVE 1927 SW COLLEGE RD Address: Address: OCALA, FL 34470 OCALA, FL 34471 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

MARKHAM, JO ANN Name: Name: 8350 NW 145TH ST. Address: Address: City-St-Zip: REDDICK, FL 32686 City-St-Zip:

Title: () Delete Title: 2VP (X) Change () Addition

FLECHAS, ALFRED J. JR. FLECHAS, KEITH J. Name: Name: Address: 1431 SW 20TH AVE Address: RT 2 12660 E HWY 25 City-St-Zip: City-St-Zip: OCALA, FL 344743007 OCKLAWAHA, FL 32179

Title: (X) Delete Title: () Change () Addition

Name: FLECHAS, KEITH J Name: RT 2 12660 EAST HWY 25 Address: Address: City-St-Zip: OCKLAWAHA, FL 32179 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: ALFRED J FLECHAS JR Ρ 04/17/2009

Electronic Signature of Signing Officer or Director

Date