


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # F01047 1. Entity Name FLALANCO, INC.	
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Principal Place of Business 1259 MAIN ST P.O. BOX 740 CHIPLEY, FL 32428 US	Mailing Address 1259 MAIN ST P.O. BOX 740 CHIPLEY, FL 32428 US
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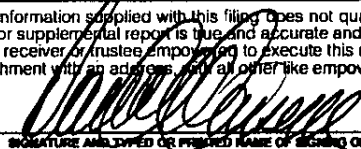
<p>6. Name and Address of Current Registered Agent</p> <p>CARSWELL, DAVID C. 1259 MAIN ST P.O. BOX 740 CHIPLEY, FL 32428</p>	
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<p>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.</p> <p>SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering)</p> <p>DATE _____</p>	
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<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p>	
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<p>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</p>	<p>10. OFFICERS AND DIRECTORS</p> <table border="1"> <tr> <td>TITLE</td> <td>PD</td> </tr> <tr> <td>NAME</td> <td>CARSWELL, DAVID C</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1259 MAIN ST</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CHIPLEY FL. 32428</td> </tr> <tr> <td>TITLE</td> <td>SDT</td> </tr> <tr> <td>NAME</td> <td>REGISTER, STEPHEN B JR</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1552 BRICKYARD RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CHIPLEY FL. 32428</td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>	TITLE	PD	NAME	CARSWELL, DAVID C	STREET ADDRESS	1259 MAIN ST	CITY-ST-ZIP	CHIPLEY FL. 32428	TITLE	SDT	NAME	REGISTER, STEPHEN B JR	STREET ADDRESS	1552 BRICKYARD RD	CITY-ST-ZIP	CHIPLEY FL. 32428	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP	
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<p>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 like empowered.</p>	
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<p>SIGNATURE: </p> <p>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</p>	<p>David C. Carswell Jan. 8, 2008, 850 638-7070</p> <p>Date Daytime Phone #</p>
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<p>01042008 No Chg-P CR2E034 (11/05)</p>	
<p>4. FEI Number 59-2030281</p>	<p>Applied For Not Applicable</p>
<p>5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required</p>	

<p>U00000776756 01/09/08-80036-024 158.75</p>

<p>02/09/08 158.75</p>

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