## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000004425

Entity Name: THE FLAGSHIP GROUP, LTD., INC.

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
33309 NORFOLK, VA 23510				5000 WORLD TRADE CTR STE 5000 101 W MAIN STREET NORFOLK, VA 2350		
Current Mailing Address:				New Mailing Address:		
101 WEST MAIN STREET, SUITE 5000 NORFOLK, VA 23510				5000 WORLD TRADE CTR STE 5000 101 W MAIN STREET NORFOLK, VA 2350		
FEI Number:	74-1946970	FEI Number Applied For ( )	FEI Num	ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US  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:						
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RILEY, THOMAS	SEWOOD AVENUE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V,S () D GRAMMIG, LAUR 3101 W. MLK, JR TAMPA, FL 3360	EL L . BOULEVARD, SUITE 400		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V,AS () D DONEGAN, JR., T 3101 W. MLK, JR TAMPA, FL 3360	THOMAS M . BOULEVARD, SUITE 400		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () D MOORE, LYNDA 5900 N. ANDREW FT. LAUDERDALE	/S AVENUE, SUITE 300		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	WALKER, CORY	EWOOD AVENUE		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () D BURNS, CHRIS 101 W. MAIN STF NORFOLK, VA 23	REET, SUITE 5000		Title: Name: Address: City-St-Zip:	() Change () Addition	
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						

SIGNATURE: LAUREL L. GRAMMIG S 04/24/2008

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.