



**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Apr 29, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L00000009611</b> 1. Entity Name <b>FLAGLER ENTERPRISES, LLC</b>		
Principal Place of Business <b>138 LIVE OAK AVENUE DAYTONA BEACH, FL 32114-4912</b>	Mailing Address <b>138 LIVE OAK AVENUE DAYTONA BEACH, FL 32114-4912</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>JAMES J. JEARN, P.A. 168 LIVE OAK AVENUE DAYTONA BEACH, FL 32114-4912</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<b>Filing Fee is \$50.00 Due by May 1, 2004</b>		<b>U000000141621 04/30/04-80018-010 50.00</b>
<b>9. MANAGING MEMBERS/MANAGERS</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR MILANICK, JOHN 2928 N OCEANSHORE FLAGLER BEACH, FL 32136	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR MILANICK, ALEXANDER 107 EDGEWOOD DRIVE HARMONY, PA 16037	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.  <b>SIGNATURE:</b>  <b>4/26/04</b> <b>(841)349-3473</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		