2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013781

Entity Name: FLAGLER FLOORCOVERINGS & SUPPLIES LLC

FILED Apr 27, 2006 Secretary of State

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

604-5 E MOODY BLVD. BUNNELL, FL 32110

Current Mailing Address: New Mailing Address:

PO BOX 2672 BUNNELL, FL 32110

FEI Number: 04-3643852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HARPER, JAMES L JR.

604-5 E. MOODY BLVD.

BUNNELL, FL 32110 US

HARPER, JAMES L JR.

604-5 E. MOODY BLVD.

PO BOX 2672

BUNNELL, FL 32110 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

in the State of Florida.

SIGNATURE: JAMES L. HARPER 04/27/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 HARPER, JAMES L
 Name:

 Address:
 604-5 E MOODY BLVD.
 Address:

 City-St-Zip:
 BUNNELL, FL 32110
 City-St-Zip:

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

 Name:
 TURNER, RONNIE
 Name:
 HARPER, JAMES L SR

 Address:
 PO BOX 2672
 Address:
 PO BOX 1077

 City-St-Zip:
 BUNELL, FL 32110
 City-St-Zip:
 BUNELL, FL 32110

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

 Name:
 HARPER, CLINT
 Name:

 Address:
 PO BOX 1077
 Address:

 City-St-Zip:
 BUNNELL, FL 32110
 City-St-Zip:

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

 Name:
 SMITH, ROBERT
 Name:

 Address:
 PO BOX 2672
 Address:

 City-St-Zip:
 BUNNELL, FL 32110
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: JAMES L. HARPER MGRM 04/27/2006