2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018200

Entity Name: FLAGSTAFF INVESTMENTS, LLC

Current Principal Place of Business:

4300 WEST CYPRESS STREET, #900
TAMPA, FL 33607

New Principal Place of Business:

1905 SOUTH HOLLY LANE
TAMPA, FL 33629

Current Mailing Address:

4300 WEST CYPRESS STREET, #900
TAMPA, FL 33607

New Mailing Address:

64 RITZ COVE DRIVE
MONARCH BEACH, CA 92629

FEI Number: 42-1591512   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

SALAS, RICARDO A
4300 WEST CYPRESS STREET, #900
TAMPA, FL 33607   US

Name and Address of New Registered Agent:

SALAS, RICARDO A
1905 SOUTH HOLLY LANE
TAMPA, FL 33629   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: RICARDO A. SALAS   03/01/2006

    Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM   ( ) Delete
Name: SALAS, RICARDO A
Address: 807 SOUTH ROME AVENUE
City-St-Zip: TAMPA, FL 33606

Title: MGRM   ( ) Delete
Name: WILSON, RICHARD H III
Address: 1905 SOUTH HOLLY LANE
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES:

Title: MGRM   (X) Change ( ) Addition
Name: SALAS, RICARDO A
Address: 64 RITZ COVE DRIVE
City-St-Zip: MONARCH BEACH, CA 92629

Title: ( ) Change ( ) Addition
Name:
Address:
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: RICARDO A SALAS   MGRM   03/01/2006

    Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date