

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013072

FILED
Jul 29, 2009
Secretary of State

Entity Name: FLAGLER WEST REALTY, LLC

Current Principal Place of Business:

3455 GOLDEN MEADOW LN
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

3455 GOLDEN MEADOW LN
ORMOND BEACH, FL 32174 US

New Mailing Address:

2250 GRANADA DRIVE
SOUTH DAYTONA, FL 32119 US

FEI Number: 38-3705704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MOREMEN, SUSAN A
252B SOUTH BEACH STREET
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

MOREMEN, SUSAN A
2250 GRANADA DRIVE
SOUTH DAYTONA, FL 32119 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: SUSAN A MOREMEN

07/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROBINSON, THOMAS W
Address: 3455 GOLDEN MEADOW LN
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: MOREMEN, SUSAN A
Address: 252B SOUTH BEACH STREET
City-St-Zip: ORMOND BEACH, FL 32724 US

Title: MGRM () Delete
Name: PHILLIPS, PAUL M
Address: 116 PINECREST AV
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: SUSAN A MOREMEN

RA

07/29/2009

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