2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000030593

Title:

Name:

Address:

City-St-Zip:

MGRM

() Delete

BRAREN, MICHAEL E

4315 PABLO OAKS COURT

JACKSONVILLE, FL 32254

Entity Name: FLAGLER PARTNERS LLC

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 300 S CENTRAL AVENUE SUITE 105 FLAGLER BEACH, FL 32136 US **Current Mailing Address: New Mailing Address:** 55 OLD POWERS PLACE ATLANTA, GA 30327 FEI Number: 20-1027847 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HORAN, JOHN HORAN, JOHN 300 S CÉNTRAL AVE, SUITE 105 300 S CÉNTRAL AVE, FLAGLER BEACH, FL 32136 SUITE 105 FLAGLER BEACH, FL 32136 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: 02/11/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition HORAN, JOHN W Name: Name: Address: PO BOX 2103 Address: City-St-Zip: FLAGLER BEACH, FL 32136 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: KENNELLY, ROBERT C Name: Address: 55 OLD POWERS PLACE Address: City-St-Zip: ATLANTA, GA 303274212 US 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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: ROBERT KENNELLY MEM 02/11/2009