

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 26, 2006 08:00 A
Secretary of State

DOCUMENT # L04000042891

1. Entity Name
FLAG LEASING II, LLC



Principal Place of Business
3000 LANGLEY AVE, STE 402
PENSACOLA, FL 32504

Mailing Address
3000 LANGLEY AVE, STE 402
PENSACOLA, FL 32504



01042006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1213026

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MATTHEWS, EDESEL F JR.
308 SOUTH JEFFERSON STREET
PENSACOLA, FL 32502

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CORLEY, DIANE
STREET ADDRESS	3000 LANGLEY AVE STE 402
CITY-ST-ZIP	PENSACOLA, FL 32504
TITLE	MGRM
NAME	LOWERY, RODGER
STREET ADDRESS	3000 LANGLEY AVE STE 402
CITY-ST-ZIP	PENSACOLA, FL 32504
TITLE	MGRM
NAME	FRUITTICHER, TOM
STREET ADDRESS	3000 LANGLEY AVE STE 402
CITY-ST-ZIP	PENSACOLA, FL 32504
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000402163
02/02/06-80074-017 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE *DIANE CORLEY* DIANE CORLEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

12-30-05 850477-0419