## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000075403

## **FILED** Mar 29, 2006 8:00 am Secretary of State 03-29-2006 90020 025 \*\*\*\*50.00

FLAGLER	REALTY, LLC										
Principal Place of Business 3540 FOREST HILL BLVD., SUITE 203 WEST PALM BEACH, FL 33406		Mailing Address 3540 FOREST HILL BLVD., SUITE 203 WEST PALM BEACH, FL 33406			20022176						
2. Principal P	Place of Business	3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				03262006	Chg-LLC	CR2E08	3 (11/05)		
City & State		City & State				4. FEI Numb	per	<u>.</u>		oplied For	
Zip	Country	Zip	Count	try		5. Certificate	e of Status Desired		5.00 Add		
6. Name and Address of Current Registered Agent						7. Name and	d Address of New	Registered A	gent		
ARMOUR, ALAN I II 1645 PALM BEACH LAKES BLVD., SUITE 1200 WEST PALM BEACH, FL 33401					Name Street Address (P.O. Box Number is Not Acceptable)						
				City				FL	Zip Cod	е	
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											
<b>.</b>					· o required	wrett real lattering)	r <del>i</del>	DATE		·	
Filing Fee is \$50.00 Due by May 1, 2006						i		ke check pa la Departme		<b>e</b>	
9.	MANAGING MEMBERS/MANAGERS						ADDITIONS	CHANGES			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR SPARK, BEVERLY L 1731 PRESIDENTIAL WAY, C-20; WEST PALM BEACH, FL 33401	☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		ET ADDRESS ST-ZIP	Sin	See Is	eaton Ocean De #:		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP	Sec	4	Denting Hill Blud each IR 3		□ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Oelete		I					Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with t	Delete	CITY-	T ADDRESS ST-ZIP					☐ Change	Addition	

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: Il Luck Deuter Signature and Typed or Printed Name of Sign

ANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/27/06

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