





**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 08:00 A
Secretary of State

DOCUMENT # M93066 1. Entity Name FL ENTERPRISES MANAGEMENT, INC.			
Principal Place of Business 7550 HINSON STREET 13D ORLANDO, FL 32819		Mailing Address 7550 HINSON STREET 13D ORLANDO, FL 32819	
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent STAPE, TERRY R 7550 HINSON ST ORLANDO, FL 32819			
		03182006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2909492	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
3. 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:  3-18-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)</small>		DO NOT WRITE IN THIS SPACE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		DATE 04/06/06-80041-018 150.00	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		P STAPE, TERRY R 7550 HINSON ST ORLANDO, FL 32819	
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DO NOT WRITE IN THIS SPACE			
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  Terry R. Stape <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		3-18-06 407-341-4485 <small>Date Daytime Phone #</small>	