

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004927

FILED  
Apr 24, 2012  
Secretary of State

Entity Name: FLAGLERLIVE.COM, INC.

**Current Principal Place of Business:**

33 POSTMAN LANE  
PALM COAST, FL 32164

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 354623  
PALM COAST, FL 32135

**New Mailing Address:**

FEI Number: 27-2691938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TRISTAM, PIERRE  
33 POSTMAN LANE  
PALM COAST, FL 32164 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: TRISTAM, PIERRE  
Address: 33 POSTMAN LANE  
City-St-Zip: PALM COAST, FL 32164

Title: C  
Name: SHAPIRO, MERRILL  
Address: 58 MOUNT VERNON LANE  
City-St-Zip: PALM COAST, FL 32164

Title: D  
Name: GUINES, JIM  
Address: 3 WOODLYN LANE  
City-St-Zip: PALM COAST, FL 32164

Title: D  
Name: LOWEN, LINDA  
Address: PO BOX 354623  
City-St-Zip: PALM COAST, FL 32135

Title: D  
Name: MUSSER, DONALD  
Address: 1521 WOODSIDE DR.  
City-St-Zip: DELAND, FL 32720

Title: D  
Name: WIGGINS, DAVID  
Address: 3855 WINSTON RD.  
City-St-Zip: DELAND, FL 32720

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PIERRE TRISTAM

D

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date