

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17986

FILED
Jul 10, 2007
Secretary of State

Entity Name: ENTERPRISE FLAGLER, INC.

Current Principal Place of Business:

CORPORATE PLAZA
I-H
PALM COAST, FL 32137 US

New Principal Place of Business:

20 AIRPORT ROAD
D
PALM COAST, FL 32164 US

Current Mailing Address:

CORPORATE PLAZA
I-H
PALM COAST, FL 32137 US

New Mailing Address:

20 AIRPORT ROAD
D
PALM COAST, FL 32164 US

FEI Number: 59-2742897 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHIUMENTO, III, MICHAEL
4 OLD KINGS RD N, SUITE B
PALM COAST, FL 32137 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: DP () Delete
Name: BARR, ART
Address: PO BOX 220
City-St-Zip: FLAGLER BEACH, FL 32136

Title: DV () Delete
Name: CHIUMENTO, III, MICHAEL
Address: 4 OLD KINGS ROAD NORTH, SUITE B
City-St-Zip: PALM COAST, FL 32137

Title: DS () Delete
Name: DANIEL, TAMMY
Address: 60 MEMORIAL MEDICAL PARKWAY
City-St-Zip: PALM COAST, FL 32164

Title: DM () Delete
Name: COOLEY, THOMAS E
Address: 1 CORPORATE DRIVE, SUITE 1-H
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CHIUMENTO, III, MICHAEL
Address: 4 OLD KINGS ROAD NORTH, SUITE B
City-St-Zip: PALM COAST, FL 32137 US

Title: DV (X) Change () Addition
Name: CULLIS, JIM
Address: 5 SANDPIPER COURT
City-St-Zip: PALM COAST, FL 32137

Title: DS (X) Change () Addition
Name: BOB, DEVORE
Address: 1 CORPORATE DRIVE, SUITE 2-B
City-St-Zip: PALM COAST, FL 32137

Title: () Change () Addition
Name:
Address:
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 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 an address, with all other like empowered.

SIGNATURE: THOMAS COOLEY

DM

07/10/2007

Electronic Signature of Signing Officer or Director

Date