

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000098759

FILED
Jan 17, 2007
Secretary of State

Entity Name: FLAGSHIP MORTGAGE BANC, INC.

Current Principal Place of Business:

205 S. W. C. OWEN
CLEWISTON, FL 33440

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1779
CLEWISTON, FL 33440

New Mailing Address:

FEI Number: 65-1063034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IGLER & DOUGHERTY, P.A.
1501 PARK AVE E
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: SHUPE, CHRISTOPHER H
Address: 205 S. W. C. OWEN
City-St-Zip: CLEWISTON, FL 33440

Title: DP () Delete
Name: BUELL, JACK A
Address: 205 S. W. C. OWEN
City-St-Zip: CLEWISTON, FL 33440

Title: DSV () Delete
Name: KNOWLTON, LINDA
Address: 205 S. W. C. OWEN
City-St-Zip: CLEWISTON, FL 33440

Title: DST () Delete
Name: JOHNSON, JAMES J
Address: 205 S.W.C. OWEN AVE
City-St-Zip: CLEWISTON, FL 33440

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: JOHNSON, JAMES E
Address: 205 S. W. C. OWEN
City-St-Zip: CLEWISTON, FL 33440

Title: DVP (X) Change () Addition
Name: TUPPER, RICHARD G
Address: 205 S. W. C. OWEN
City-St-Zip: CLEWISTON, FL 33440

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES J. JOHNSON

DST

01/17/2007

Electronic Signature of Signing Officer or Director

_____ Date