2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000073687

Entity Name: THE FLAGSTONE GROUP, INC

FILED Sep 22, 2004 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
--	----------------------------

3935 CHICORA WOOD PLACE 10920 BAYMEADOWS ROAD JACKSONVILLE, FL 32224

SUITE 27 BOX 143

JACKSONVILLE, FL 32256

Current Mailing Address:

New Mailing Address:

10920 BAYMEADOWS ROAD SUITE 27, BOX 143 JACKSONVILLE, FL 32256

FEI Number: 22-3858255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

AMERSON, GLENN AMERSON, GLENN 421 EAST WOODHAVEN DRIVE 3935 CHICÓRA WOOD PLACE JACKSONVILLE, FL 32224 PONTE VEDRA BEACH, FL 32082

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: GLENN A. AMERSON 09/22/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change () Addition AMERSON, GLENN ALLEN AMERSON, GLENN ALLEN Name: Name: 3935 CHICORA WOOD PLACE 421 EAST WOODHAVEN DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: Title: () Change () Addition () Delete

KRIEGER, KRISMAN Name: Name: 550 LAKE ROAD Address: Address: PONTE VEDRA BCH., FL 32082 City-St-Zip: City-St-Zip:

() Delete Title: Title: () Change () Addition

KRIEGER, KURT Name: Name: POST OFFICE BOX 465 Address: Address: City-St-Zip: EMIGSVILLE, PA 17318 City-St-Zip:

Title: () Delete Title: () Change () Addition

COMBS, CLYDE JR. Name: Name: Address: 499 CINNAMON DRIVE Address: City-St-Zip: SATELLITE BCH., FL 32937 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GLENN A. AMERSON MR 09/22/2004