

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008271

FILED  
Jan 08, 2007  
Secretary of State

Entity Name: FLAGLER CROSSROADS, INC.

## Current Principal Place of Business:

880 AIRPORT ROAD, STE. 108  
OAK POINTE BUSINESS PARK  
ORMOND BEACH, FL 32174

## New Principal Place of Business:

880 AIRPORT ROAD, STE. 108  
OAK POINTE BUSINESS PARK  
ORMOND BEACH, FL 32174 US

## Current Mailing Address:

880 AIRPORT ROAD, STE. 108  
OAK POINTE BUSINESS PARK  
ORMOND BEACH, FL 32174

## New Mailing Address:

880 AIRPORT ROAD, STE. 108  
OAK POINTE BUSINESS PARK  
ORMOND BEACH, FL 32174 US

FEI Number: 41-2076394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CHIUMENTO, MICHAEL D II  
4 OLD KINGS ROAD NORTH, 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

Title: D ( ) Delete  
Name: NEWSLOW, JAMES A III  
Address: 880 AIRPORT RD., STE. 108  
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete  
Name: PAGE, BRUCE  
Address: 1520 LAMBERT AVE.  
City-St-Zip: FLAGLER BEACH, FL 32136

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: NEWSLOW, JAMES A III  
Address: 880 AIRPORT RD., STE. 108  
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: D (X) Change ( ) Addition  
Name: PAGE, BRUCE  
Address: 1520 LAMBERT AVE.  
City-St-Zip: FLAGLER BEACH, FL 32136 US

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 A. NEWSLOW, III

D

01/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date