

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13493

FILED
Feb 27, 2009
Secretary of State

Entity Name: FLASH HOLDING COMPANY

Current Principal Place of Business:

215 PENDLETON STREET
WAYCROSS, GA 31501

New Principal Place of Business:

Current Mailing Address:

215 PENDLETON STREET
P.O. BOX 2149
WAYCROSS, GA 31501

New Mailing Address:

FEI Number: 58-1484387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGESS, GRANVILLE C.
303 CENTRE STREET, STE. 200
FERNANDINA BEACH, FL 32034 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: PD () Delete
Name: WALKER, JAMES A. JR.,
Address: RIVER OAKS DR.
City-St-Zip: BLACKSHEAR, GA 31516

Title: D () Delete
Name: JONES, J.C. JR.,
Address: 505 BENT TREE ROAD
City-St-Zip: BLACKSHEAR, GA 31516

Title: D () Delete
Name: JONES, CAROLE,
Address: 505 BENT TREE ROAD
City-St-Zip: BLACKSHEAR, GA 31516

Title: C () Delete
Name: JONES, J.C., III,
Address: 441 BLOUNT ROAD
City-St-Zip: WAYCROSS, GA 31503

Title: STD () Delete
Name: JONES, PATRICK
Address: 1615 SEMINOLE SPRINGS RD
City-St-Zip: WAYCROSS, GA 31501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREG HIGGINSON

CAO

02/27/2009

Electronic Signature of Signing Officer or Director

_____ Date