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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # P32175

(2)

FLAGLER PROPERTIES COMPANY OF GEORGIA

	DE PARKWAY. N.W. EEK. SUITE 105		3715 NORTHSIDE PARKWAY, N.W. 300 NORTHCREEK, SUITE 105					
ALLANIA ON S	0021	KIDHIN ON GOOZIYEGOO			3. Date Incorporated or Qualified 12/13/1990	3a. Date of L 03/13/19		
2. Principal F	hace of Business	2a. Mailing Address	·····		4. FEI Number	00/10/10	Applied For	
21		26			58-1782515		Not Applicable	
Suite, Apt	#, ctc	Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 Additional se Required	
Cily & Stat	C:	City & State		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Election Campaign Financing Trust Fund Contribution	\$5	.00 May Be	
23] Ζιμι	Country	28 Z ₍₂₎	Country		This corporation has liability for			
24	25	L '	30			Yes No	361 8. 180.002.	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Agent		
LEPI	rell, samuel L., esq.		81 1	Vame				
1301 GULF LIFE DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)				
	E 1500							
JAC	KSONVILLE FL 32207		83					
			84 (City		85	Zip Code	
	607.6	ron - 1007 tron Fig. 14- Otto 4			ab i	FL °°	to a lite or mintown of	
• 11. Pursuaet office or r	to the provisions of Sections 607.0 registered agent, or both, in the St	isuz and 607,1508, Florida Statute ate of Florida. Such change was a	is, the above-nuthorized by th	amed corpo le corporation	oration submits this statement for the pon's board of directors. I hereby acceptance	ourpose of chang pt the appointme	ing its registered nt as registered	
agcht ±a	mi familiar with, and accept the ob	ligations of, Section 607.0505, Flo	rida Statutes.					
SIGNATURE	Beginature: Typed or printed name of registered	ANOTE AND IT APPLY SELECTION AND AND AND AND AND AND AND AND AND AN	Registered Agent a	unnah en son inh	d when rejectating	DATE		
12.		ND DIRECTORS	13.	ngratore require	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12	
TIR: F	CPT	DELETE	1.1 TITLE		7,557,010,011,1000 (0 01.1.	☐ Ch		
NAME	MCCLAIN, WILLIAM A., III		1.2 NAME	Ì				
STREET ADDRESS	3715 NORTHSIDE PKWY NV	٧	1.3 STREET AD	DRESS				
CITY-ST ZIP	ATLANTA GA		1,4 CITY-ST-2					
TITLE	V\$	☐ DELETE	2.1 TITLE	"		☐ Ch	ange Addition	
NAME	MCCLAIN, WILLIAM A IV		2.2 NAME	Ì				
STREET ADDRESS	3715 NORTHSIDE PKWY ST	E 105	2 3 STREET AD	ORESS				
City St. 7IP	ATLANTA GA		2 4 CITY-ST-					
TIBLE		DELETE	3 1 TITLE			Ch	ange Addition	
MMs			3.2 NAME					
SPREET ADDRESS			3 3 STREET AD	DRESS				
CITY ST ZIP			3.4. CITY-ST-	ZIP				
TiT, €		DELETE	4.1 TITLE			☐ Ch	ange 🔲 Addition	
NAME			4. 2 NAME					
STREET ACORESS			4.3 STREET AD	DRESS			Ì	
CHY-SI 72			4.4 CITY - \$T - 2	!IP				
1-11-1		☐ DELETE	5.1 TITLE			Ch	ange Addition	
NAME			5.2 NAME					
STREET AFORESS			5.3 STREET AD	DRESS			l l	
CIDY-51 Zif			5.4 CITY - ST - 2	P P				
T#1LF		☐ DELETE	61 TITLE		•	Ch	ange 🔲 Addition	
NAMI			6.2 NAME					
STEELT ADORESS			6.3 STREET AD	DRESS				
A.7 01 3.0			C 4 0171/ C7 1					

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the

Information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 (Chapter 607) and that my name address.

SIGNATURE: