2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P93000081939



FILED Feb 06, 2004 8:00 am Secretary of State

EL ACI ED	1. Entity Name					02-06-2004 90022 014 ***150.00		
FLAGLER FOREST PRODUCTS, INCORPORATED						02-00-2004 90022 014	130.00	
Principal Plac	e of Business	Mailing Address			•			
99 FLAGLER REGIONAL PLAZA		P.O. BOX 518						
PALM COAS	ST FL 32137	BUNNELL FL 32110						
US								ani ii iasi
2. Principal P	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Corte Art Haste						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1	MOORE CR2E034	(11/03)		
City & State		City & State			4. FEI Number	ΙΔn	olied For	
Say a state					"	59-3211947	-	Applicable
Zip	Country	Zip	Coun	trv			8.75 Addi	
					5		ee Required	
	6. Name and Address of Curren	t Registered Agent			7	7. Name and Address of New Registered A	gent	
				Name	. 4.	The second of th		·
CREWS, MATTHEW S			Street Address (P.O. Box Number is Not Acceptable)					
	FLAGELR REGIONAL PLAZ AGLER BEACH FL 32136	Street Address		iciess (i .c	5. Box Number is Not Acceptable)			
FLA	GLER BEACH FL 32136							
				City			Zip Code	
				,		FL	'	
		for the purpose of changing its	registere	ed office or i	registered	agent, or both, in the State of Florida. I am fa	miliar with, a	and accept
the obligations of registered agent.								
SIGNATURE								
	Signature, typed or printed name of registered ager	nt and title if applicable. (NOT	E: Registere	d Agent signatur	re required who	en reinstating) DATE		
FILE:NOW!!! FEE IS \$150.00						6 Floring Committee Financian	AF 0	
After May 1, 2004 Fee will be \$550.00						Selection Campaign Financing Trust Fund Contribution.		May Be to Fees
Make Check Payable to Florida Department of State						Tradit Grid Garningarion.	riadou	10 1 000
		Park Control of the C						
10.	OFFICERS ANI	D DIRECTORS	11.			ADDITIONS/CHANGES TO OFFICERS AND I		IN 11
TITLE	PT	D DIRECTORS Delete	TITLE				DIRECTORS Change	IN 11
TITLE NAME	PT CREWS, MATTHEW		TITLE	£ (creu	us, matthew		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT CREWS, MATTHEW 79 ERIC DRIVE PALM COAST FL 32164	₽ Delete	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP	creu	us, matthew Box 1209 rell, FL 32110	Change	Addition
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indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an exploress, with all other like empowered.

Date

Daytime Phone #