

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000028586 (1)

1. Corporation Name
FLAGSHIP ENTERPRISES, INC.

Principal Place of Business

715 VASSAR STREET
ORLANDO FL 32804

Mailing Address

715 VASSAR STREET
ORLANDO FL 32804-4920



2. Principal Place of Business

21 3210 Dade Avenue
Suite, Apt. #, etc.

22 City & State

23 Orlando, FL

24 Zip 32804

Country
25 Orange

2a. Mailing Address

26 3210 Dade Avenue
Suite, Apt. #, etc.

27 City & State

28 Orlando, FL

29 Zip 32804

Country
30 Orange

3. Date Incorporated or Qualified

04/02/1996

3a. Date of Last Report

4. FEI Number

59-3379312

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

SANDERLIN, JO ANNE
~~715 VASSAR STREET~~ 3210 Dade Ave.
ORLANDO FL 32804

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SANDERLIN, W.M.
STREET ADDRESS ~~715 VASSAR STREET~~ 3210 Dade Ave.
CITY-ST-ZIP ORLANDO FL 32804

TITLE D
NAME SANDERLIN, JO ANNE
STREET ADDRESS ~~715 VASSAR STREET~~ 3210 Dade Ave.
CITY-ST-ZIP ORLANDO FL 32804

TITLE D
NAME SANDERLIN, JACQUELINE
STREET ADDRESS ~~715 VASSAR STREET~~ 3210 Dade Ave.
CITY-ST-ZIP ORLANDO FL 32804

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 3210 Dade Avenue
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 3210 Dade Avenue
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 3210 Dade Avenue
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0085064

CR2E034 (9/96)