2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am DOCUMENT # P96000048920 Secretary of State FLAGLER FAIRCHILD OAKS, INC. 04-26-2004 90572 037 ***150.00 Principal Place of Business Mailing Address 34 AUDUBON LANE PO BOX 1626 FLAGLER BEACH, FL 32136 ORMOND BEACH, FL 32175 IIS US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04212004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3404399 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DONALD E. HAWKINS PA-Street Address (P.O. Box Number is Not Acceptable) **501 SOUTH RIDGEWOOD AVENUE** DAYTONA BEACH, FL 32114 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ■ Delete TITLE ■ Addition WHITE, JAMES E NAME NAME STREET ADDRESS 34 AUDUBON LANE STREET ADDRESS CITY-ST-ZIF FLAGLER BEACH, FL 32136 CITY-ST-7IP D TITLE □ Delete nne Change ☐ Addition NAME WHITE, SARAH E NAME STREET ADDRESS 34 AUDUBON LANE STREET ADDRESS CITY-ST-ZIP FLAGLER BEACH, FL 32136 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME BLEDSOE, JAMES R NAME STREET ADDRESS 31 HABERSHAM DR STREET ADDRESS 144 Riverside Drive CITY_ST_ZIP. ELAGLER BEACH, FL 32136 CITY-ST-ZIP Ormond_Beach, FL_32176_ mre ☐ Delete TITLE Change ■ Addition NAME BLEDSOE, LORE L NAME 144 Riverside Drive STREET ADDRESS 31 HABERSHAM DR STREET ADDRESS FLAGLER BEACH, FL 32136 Ormond Beach, FL CITY-ST-ZIP 32176 CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information exposed 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 report or suppremental 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 true employered 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 address, with all other like empowered. SIGNATURE 4-21-04 386-676-1501

JAMES RONNIE BLEDSOE

Daytime Phone #

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE