2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000100582

Entity Name: FLF MANAGEMENT, INC.

FILED Feb 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

38 LINWOOD ROAD

FORT WALTON BEACH, FL 32547

Current Mailing Address: New Mailing Address:

38 LINWOOD ROAD

FORT WALTON BEACH, FL 32547

FEI Number: 59-3414387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FISHER, FRANKLIN L FISHER, BROCK L 38 LINWOOD ROAD 38 LINWOOD ROAD

FORT WALTON BEACH, FL 32547 US FORT WALTON BEACH, FL 32547 US

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: BROCK L. FISHER 02/16/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

Name: FISHER, FRANKLIN L Name: Address: 38 LINWOOD ROAD Address:

City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip:

Title: D () Delete Title: DSEC (X) Change () Addition Name: WILSON, KIM E Name: WILSON, KIM E

Address: 38 LINWOOD ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547
Address: 38 LINWOOD ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: DVPS () Delete Title: DP (X) Change () Addition Name: FISHER, BROCK L Name: FISHER, BROCK L

 Name:
 FISHER, BROCK L

 Address:
 19 POQUITO RD
 Address:
 293 SHALIMAR DR

 City-St-Zip:
 SHALIMAR, FL 32579
 City-St-Zip:
 SHALIMAR, FL 32579

Title: () Delete Title: DVP () Change (X) Addition

 Name:
 Name:
 GILL, JAYNE N

 Address:
 Address:
 38 LINWOOD ROAD

City-St-Zip: City-St-Zip: FORT WALTON BEACH, FL 32547

I hereby certify that the information supplied with this filing does not qualify for the 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: BROCK L FISHER PRES 02/16/2006