2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000058916

Entity Name: FLAME VINE, INC.

FILED Apr 17, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Principal Place of Business:	new Fincipal Place of Business:

700 EAST SANDPIPER ST. 1996 TOURNAMENT DR. APOPKA, FL 32712 APOPKA, FL 32712

Current Mailing Address: New Mailing Address:

P.O. BOX 1010 1996 TOURNAMENT DR. APOPKA, FL 327041010 APOPKA, FL 32712

FEI Number: 59-3469575 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:

MCCLURE, GEORGE G

700 EAST SANDPIPER ST.
APOPKA, FL 32712 US

MCCLURE, JOHN PETER
5325 SUMMERLIN RD.
PORT ST. LUCIE, FL 34987 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: JOHN PETER MCCLURE 04/17/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete

 Name:
 MCCLURE, GEORGE G

 Address:
 700 EAST SANDPIPER ST.

 City-St-Zip:
 APOPKA, FL 32712

 Title:
 S
 () Delete

 Name:
 MCCLURE, NANCY B

 Address:
 700 EAST SANDPIPER ST.

 City-St-Zip:
 APOPKA, FL 32712

Title: () Delete

Name: Address: City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: MCCLURE, JOHN PETER
Address: 5325 SUMMERLIN RD.
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: VP/T (X) Change () Addition

Name: MCCLURE, NANCY B
Address: 1996 TOURNAMENT DR.
City-St-Zip: APOPKA, FL 32712

Title: S () Change (X) Addition

Name: PATRICIA, POSEY
Address: 1996 TOURNAMENT DR.
City-St-Zip: APOPKA, FL 32712

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: JOHN PETER MCCLURE P/D 04/17/2007