2006 FOR PROFIT CORPORATION

Mar 23, 2006 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P97000092744 1. Entity Name FLAG REALTY, INC. Principal Place of Business Mailing Address 3000 LANGLEY AVENUE 3000 LANGLEY AVENUE SUITE 402 SUITE 402 PENSACOLA, FL 32504 PENSACOLA, FL 32504 CR2E034 (11/05) 03212006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3485351 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOWERY, RODGER K DO NOT WRITE 3000 LANGLEY AVENUE **SUITE 402** IN THIS SPACE PENSACOLA, FL 32504 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. DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10 TITLE NAME LOWERY, RODGER K STREET ADDRESS 3000 LANGLEY AVENUE SUITE 402 U00000478048 CITY-ST-ZIP PENSACOLA, FL 32504 04/07/06-80015-012 150.00 VTD NAME FRUITTICHER, JOHN T JR STREET ADDRESS 3000 LANGLEY AVE STE 402 CITY-ST-ZIP PENSACOLA, FL 32504 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental proof is true and generate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the occupantion or the feetwer or trust exempowered 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 attrictment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-70 TITLE NAME STREET ADDRESS CITY-ST-ZIP

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-2096

FILED

Daytime Pixore it