

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90099 016 ***150.00

DOCUMENT # P97000096790

1. Entity Name

FLAG RADIO, INC.



Principal Place of Business

504 BROOKFIELD TERRACE
DELAND FL 32724
US

New

Mailing Address

504 BROOKFIELD TERRACE
DELAND FL 32724
US

2. Principal Place of Business

3. Mailing Address

2369 S. Oak Park Dr.

2369 S. Oak Park Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DeLand FL

City & State

DeLand FL

4. FEI Number

59-3479469

Applied For

Not Applicable

Zip

Country

32724-8412

USA

Zip

Country

32724-8412

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/04)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAWKINS, LYNN M
504 BROOKFIELD TERRACE
DELAND FL 32724

Name

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

2369 S. Oak Park Dr.

City

FL

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

Lynn M. Hawkins, President

3/11/05

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME HAWKINS, LYNN M
STREET ADDRESS 504 BROOKFIELD TERRACE
CITY-ST-ZIP DELAND FL 32724

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 2369 S. Oak Park Dr.
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME SWEET, JEFFREY C
STREET ADDRESS 595 W GRANADA BLVD, SUITE A
CITY-ST-ZIP ORMOND BECH FL 32174

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME KIEFER, JERRY E.
STREET ADDRESS 5277 S RIDGEWOOD AVE #83
CITY-ST-ZIP PORT ORANGE FL 32127

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lynn M. Hawkins, President

3/11/05

Lynn M. Hawkins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #