FILED Apr 25, 2007 8:00 am Secretary of State 04-25-2007 90161 004 ***150.00

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SIGNATURE: /

DOCUMENT # P99000025422 1. Entity Name FLAGLER PUBLISHING, INC. 40079700 Principal Place of Business Mailing Address 3 CYPRESS BRANCH WAT STE 106 3 CYPRESS BRANCH WAT STE 106 PALM COAST, FL 32164 PALM COAST, FL 32164 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04212007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3564271 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 SCOTT, JAMES A JR Street Address (P.O. Box Number is Not Acceptable) 4440 N. OCEANSHORE BOULEVARD **SUITE 109** PALM COAST, FL 32137 City Zip Code FL 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. SÍGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VSO VSD TITLE ☐ Delete TITLE Change . Addition Gibbs, Judita L GIBBS, JUDITH L NAME NAME 23 Pine Harbor Drive STREET ADDRESS 7 AVE DELA MER #806 STREET ADDRESS Palm Coast FL 32137 CITY-ST-ZIP PALM COAST, FL 32137 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition Gazzoli, John NAME GAZZOLI, JOHN NAME 60 N. Waterview Or STREET ADDRESS 22 LA GORE ST STREET ADDRESS Palm Coast FL 32137 CITY-ST-7IP PALM COAST, FL 32137 CITY-ST-ZIP TITLE ☐ Defete TITLE Change ■ Addition NAME GAYTON, ERIC G NAME 16 CHINIER STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM COAST, FL 32137 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change THLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET-ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 1 hereby certify that the information supplied with this fitting does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the positive or trustee effipowered 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 attrict/ment with an address, will all other like empowered. ERIC G Gayton