

APR-22-2004 THU 03:24 PM SALT MARSH CLEVELAND&GUND

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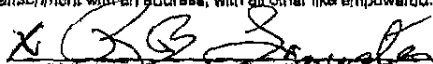
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FILED

Apr 28, 2004 08:00 AM

Secretary of State

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # S97853 1. Entity Name FLAMINGO MOTEL, INC.			
Principal Place of Business 15525 FRONT BEACH RD PANAMA CITY BCH, FL 32413		Mailing Address 15525 FRONT BEACH RD PANAMA CITY BCH, FL 32413	
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent BLUE, ROB JR. 221 MCKENZIE AVE PANAMA CITY, FL 32402		04222004 No Chg-F CR2E034 (10/03)	
		4. FEI Number 59-3101755 Applied For Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE			
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U000000136315 04/28/04-80087-017 150.00	
TITLE PD NAME LANCASTER, REGGIE B. STREET ADDRESS 15525 FRONT BEACH RD CITY-STATE-ZIP PANAMA CITY BCH, FL		DO NOT WRITE IN THIS SPACE	
TITLE ST NAME LANCASTER, DANA STREET ADDRESS 15525 FRONT BEACH RD CITY-STATE-ZIP PANAMA CITY BCH, FL 32413			
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TITLE NAME STREET ADDRESS CITY-STATE-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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			