

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K83817

**Entity Name:** FLAGLER SYSTEM, INC.

**Current Principal Place of Business:**

THE BREAKERS PALM BEACH, INC.  
ONE SOUTH COUNTY ROAD  
PALM BEACH, FL 33480

**Current Mailing Address:**

THE BREAKERS PALM BEACH, INC.  
C/O CORPORATE OFFICE ONE SOUTH COUNTY ROAD  
PALM BEACH, FL 33480 US

**FEI Number:** 65-0118212

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PRESSLY, P. KRISTEN  
LEGAL  
40 COCOANUT ROW  
PALM BEACH, FL 33480 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title	VP, CFO, TREASURER	Title	CEO, PRESIDENT, COO, DIRECTOR
Name	GILMURRAY, ALEX	Name	LEONE, PAUL N.
Address	ONE SOUTH COUNTY ROAD	Address	ONE SOUTH COUNTY ROAD
City-State-Zip:	PALM BEACH FL 33480	City-State-Zip:	PALM BEACH FL 33480
Title	VP, OFFICER		
Name	CHANDRA, ATESH		
Address	ONE SOUTH COUNTY ROAD		
City-State-Zip:	PALM BEACH FL 33480		

*I hereby 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 all other like empowered.*

**SIGNATURE:** PAUL N. LEONE

**CEO**

**02/06/2023**

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Electronic Signature of Signing Officer/Director Detail Date