

1.) CORPORATION NAME:

**FLAGSTAR ENTERPRISES, INC.**

DUE DATE: **2/29/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

SCC ID NO: **F1203415**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	20,000

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**AL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1325 N ANAHEIM BLVD

CITY/ST/ZIP: ANAHEIM, CA 92801-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ANDREW F PUZDER	
TITLE:	CEO	
ADDRESS:	6307 CARPINTERIA AVE	
CITY/ST/ZIP/CO:	CARPINTERIA, CA 93013-2901	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	E MICHAEL MURPHY	
TITLE:	PRESIDENT	
ADDRESS:	6307 CARPINTERIA AVE	
CITY/ST/ZIP/CO:	CARPINTERIA, CA 93013-2901	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TED ABAJIAN	
TITLE:	TREASURER	
ADDRESS:	6307 CARPINTERIA AVE	
CITY/ST/ZIP/CO:	CARPINTERIA, CA 93013-2901	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WILLIAM WERNER	
TITLE:	VICE PRESIDENT	
ADDRESS:	100 N BROADWAY	
CITY/ST/ZIP/CO:	ST LOUIS, MO 63102-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CHARLES A SEIGEL III	
TITLE:	VICE PRESIDENT	
ADDRESS:	6307 CARPINTERIA AVE	
CITY/ST/ZIP/CO:	CARPINTERIA, CA 93013-	

NAME: REESE STEWART TITLE: VICE PRESIDENT ADDRESS: 1325 N. ANAHEIM BLVD CITY/ST/ZIP/CO: ANAHEIM, CA 92801-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JULIE VAN ORMAN TITLE: VICE PRESIDENT ADDRESS: 1325 N. ANAHEIM BLVD CITY/ST/ZIP/CO: ANAHEIM, CA 92801-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: COLLEEN FORD-MCDONOUGH TITLE: VICE PRESIDENT ADDRESS: 1325 N. ANAHEIM BLVD CITY/ST/ZIP/CO: ANAHEIM, CA 92801-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: ROMONDOUS STOVER TITLE: ASST SECRETARY ADDRESS: 100 N. BROADWAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63102-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: LENA HINES TITLE: ASST SECRETARY ADDRESS: 100 N. BROADWAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63102-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ JULIE VAN ORMAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JULIE VAN ORMAN, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE
1/9/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	