

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106657

Entity Name: FLYNN CLINIC, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

3810 SOUTH FLORIDA AVENUE
SUITE A
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

3810 SOUTH FLORIDA AVENUE
SUITE A
LAKELAND, FL 33803 US

New Mailing Address:

FEI Number: 20-0258344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLYNN, WENDY L D.C.
3810 SOUTH FLORIDA AVENUE, SUITE A
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLYNN, WENDY L PRES
Address: 3810 S. FLORIDA AVE., SUITE A
City-St-Zip: LAKELAND, FL 33813 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WENDY LYNN FLYNN

DR

05/01/2008

Electronic Signature of Signing Officer or Director

Date