

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04487

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** FLAGSHIP REMANUFACTURING SUPPLY CO.

**Current Principal Place of Business:**

200 EAST ANN STREET  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

200 EAST ANN STREET  
PUNTA GORDA, FL 33950

**New Mailing Address:**

**FEI Number:** 59-2101998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FILEMAN, THOMAS  
2813 CORAL WAY  
PUNTA GORDA, FL 33950 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PST  
**Name:** FILEMAN, THOMAS G  
**Address:** 2813 CORAL WAY.  
**City-St-Zip:** PUNTA GORDA, FL 00000,

**Title:** V  
**Name:** FILEMAN, JOANE R  
**Address:** 2813 CORAL WAY  
**City-St-Zip:** PUNTA GORDA, FL 33950

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:** JOANE R FILEMAN

VP

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date