2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000004

Entity Name: FLINT INK NORTH AMERICA CORPORATION

FILED Apr 27, 2007 Secretary of State

•					
Current Principal Place of Business:			New Principal Place of Business:		
4600 ARROWHEAD DRIVE ANN ARBOR, MI 48105				BECK ROAD H, MI 48170	
Current Mailing Address:			New Mailing Address:		
4600 ARROWHEAD DRIVE ANN ARBOR, MI 48105			14909 N. BECK ROAD PLYMOUTH, MI 48170		
FEI Number: 38-3426405 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()	
Name and	d Address of C	Surrent Registered Agent:	Name and	Address of	New Registered Agent:
1201 HAY	ATION SERVIC S STREET SSEE, FL 3230				
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent		Date
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	VPSD () KING, LAWREN 4600 ARROWH ANN ARBOR, M	EAD DRIVE	Title: Name: Address: City-St-Zip:	VPSD () KING, LAWRE 14909 N. BEC PLYMOUTH, N	K ROAD
Title: Name: Address: City-St-Zip:	CEO () FRESCOLN, LE 4600 ARROWH ANN ARBOR, M	EAD DRIVE	Title: Name: Address: City-St-Zip:	CEO () FRESCOLN, L 14909 N. BEC PLYMOUTH, M	K ROAD
Title: Name: Address: City-St-Zip:	CFO () GANNON, MICH 4600 ARROWH ANN ARBOR, M	EAD DRIVE	Title: Name: Address: City-St-Zip:	GANNON, MIC 14909 N. BEC	K ROAD
Title: Name: Address: City-St-Zip:	VP () BISSELL, MICH 4600 ARROWH ANN ARBOR, M	EAD DRIVE	Title: Name: Address: City-St-Zip:	VP (X BISSELL, MIC 14909 N. BEC PLYMOUTH, M	K ROAD
Title: Name: Address: City-St-Zip:	VPT () STEEL, JAMES 4600 ARROWH ANN ARBOR, M	EAD DRIVE	Title: Name: Address: City-St-Zip:	VPT () DOMAS, MICH 14909 N. BEC PLYMOUTH, M	K ROAD

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: MICHELLE A. DOMAS VPT 04/27/2007