

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00
**PROFIT
CORPORATION
ANNUAL REPORT
1996**


FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J66630 (1)
1. Corporation Name
FLYNNCO, INC.



Principal Place of Business

Mailing Address

**% JOHN R. TATUM
4009 S.W. 7TH STREET
PLANTATION FL 33317**

**% JOHN R. TATUM
4009 S.W. 7TH STREET
PLANTATION FL 33317**

2. Principal Place of Business

2a. Mailing Address

21

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State Apt. #, etc.

State Apt. #, etc.

22

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City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

04/10/1987

05/10/1995

4. FEI Number

Applied For

59-2817883

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

 6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

 8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

**TATUM, JOHN R.
8251 W. BROWARD BLVD
SUITE 504
FT. LAUDERDALE FL 33324**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person or persons of registered agent, or both, if applicable

Date Registered Agent Signature required when registering

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

**PD
LAVRAR, FRANK
4009 S.W. 7TH STREET
PLANTATION FL**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the trustee or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)