

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K82301

Entity Name: FLYNT BROS., INC.

FILED  
Feb 14, 2011  
Secretary of State

**Current Principal Place of Business:**

4822 W LINEBAUGH AVE  
TAMPA, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

4822 W LINEBAUGH AVE  
TAMPA, FL 34639

**New Mailing Address:**

FEI Number: 59-2965392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLYNT, WAYNE S VP  
1760 W. HILLSBORO AVE  
TAMPA, FL 33603 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FLYNT, DOUG E  
Address: 1760 W. HILLSBOROUGH AVE  
City-St-Zip: TAMPA, FL 33603

Title: VP  
Name: FLYNT, CHARLES R  
Address: 1760 W HILLSBOROUGH AVE  
City-St-Zip: TAMPA, FL 33603

Title: VP  
Name: FLYNT, WAYNE S  
Address: 1760 W HILLSBOROUGH AVE  
City-St-Zip: TAMPA, FL 33603

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: WAYNE FLYNT

VP

02/14/2011

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

\_\_\_\_\_  
Date