

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000043925

1. Entity Name
FLYNT INVESTMENTS, LLC



Principal Place of Business

**7118 N HABANA AVE
TAMPA, FL 33614**

Mailing Address

**7118 N HABANA AVE
TAMPA, FL 33614**

DO NOT WRITE IN THIS SPACE



03072006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1233122

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

HURLEY, PHILLIP D
7118 N HABANA AVE
TAMPA, FL 33614

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and this applicable.

(NOTE: Registered Agent signature required when reinstating)

3/7/2006

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

000000472585
03/29/06-80042-016 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
HURLEY, PHILLIP D
7118 N HABANA AVE
TAMPA, FL 33614**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPS
HURLEY, MARY ANN
7118 N HABANA AVE
TAMPA, FL 33614**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/15/2006 813-340-1245

Date

Daytime Phone #