FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:27

DOCUMENT # **L96072** (8)

1. Corporation Name
FLINT FINANCIAL GROUP, INC.

Principal Place of Business	Mailing Address
~~12661 NEW BRITTANY BLVD.~~ FORT MYERS FL 33907	~~12661 NEW BRITTANY BLVD.~~ FORT MYERS FL 33907

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
08/27/1990	04/19/1994

2. Principal Place of Business	2a. Mailing Address
21 12629 New Brittany Blvd.	26 12629 New Brittany Blvd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Fort Myers FL	City & State 28 Fort Myers FL
Zip 24 33907 Country 25	Zip 29 33907 Country 30

4. FEI Number 65-0218456 ☐ Applied For ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HYNDEN, ERIC J. ~~12661~~ NEW BRITTANY BLVD. 12629 FORT MYERS FL 33907	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 12629 New Brittany Blvd 83 84 City FL 85 Zip Code

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 ✓ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☒ Change ☐ Addition
NAME	HYNDEN, ERIC J.	1.2 NAME		
STREET ADDRESS	~~12661~~ NEW BRITTANY BLVD.	1.3 STREET ADDRESS	12629 New Brittany Blvd.	
CITY-ST-ZIP	FORT MYERS FL	1.4 CITY-ST-ZIP	33907	
TITLE	SD	2.1 TITLE		☒ Change ☐ Addition
NAME	HYNDEN, SHERRI L.	2.2 NAME		
STREET ADDRESS	12661 NEW BRITTANY BLVD.	2.3 STREET ADDRESS	12629 New Brittany Blvd	
CITY-ST-ZIP	FORT MYERS FL	2.4 CITY-ST-ZIP	33907	
TITLE		3.1 TITLE	VD	☐ Change ☒ Addition
NAME		3.2 NAME	SMITH, H. Jeffrey	
STREET ADDRESS		3.3 STREET ADDRESS	12629 New Brittany Blvd.	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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 receiver 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: ✓ Sherri L. Hynden 4/4/95 813-936-2777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Optional) Phone #
Sherri L. Hynden

0321776 CP