

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000035349

Entity Name: FLICK PROPERTIES, INC.

**FILED**  
**Jan 24, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

26 SHADOW CREEK WAY  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

26 SHADOW CREEK WAY  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 54-2103366

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLICK, KEVIN  
26 SHADOW CREEK WAY  
ORMOND BEACH, FL 32174 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: FLICK, KEVIN P  
Address: 26 SHADOW CREEK WAY  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VS  
Name: FLICK, ANN C  
Address: 26 SHADOW CREEK WAY  
City-St-Zip: ORMOND BEACH, FL 32174

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: KEVIN P FLICK

PRES

01/24/2010

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

\_\_\_\_\_  
Date