


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000042945
 1. Entity Name
FLINT INVESTMENTS, INC.



Principal Place of Business Mailing Address
774 JOHN C. SIMS PKWY. **P.O. BOX 335**
NICEVILLE, FL 32578 **VALPARAISO, FL 32580**



04112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

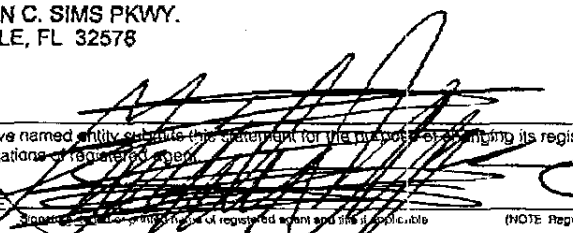
4. FEI Number Applied For
02-0690301 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
POPE, BRENT
774 JOHN C. SIMS PKWY.
NICEVILLE, FL 32578

DO NOT WRITE IN THIS SPACE

8. The above named entity certifies the 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 of registered agent and file if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

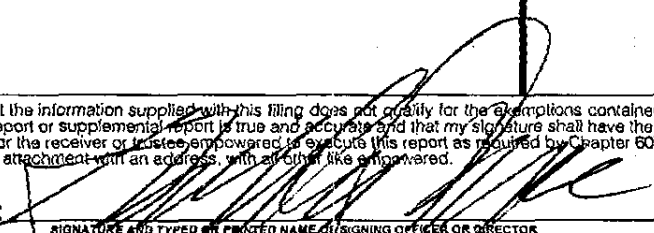
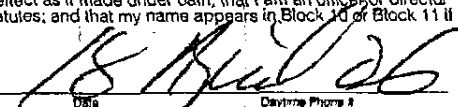
10. OFFICERS AND DIRECTORS

TITLE	PO
NAME	POPE, BRENT
STREET ADDRESS	106 A. WATER ST.
CITY - ST - ZIP	FT. WALTON BEACH, FL 32458
TITLE	VPD
NAME	POPE, GRADY D
STREET ADDRESS	106 A. WATER ST.
CITY - ST - ZIP	FT. WALTON BEACH, FL 32458
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
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TITLE	
NAME	
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CITY - ST - ZIP	

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U00000524250
 05/03/06-80106-003 150.00

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with an email like empowered.

SIGNATURE:  

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR