

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122548

Entity Name: FLYNN DOC PREP, INC.

FILED  
Apr 16, 2008  
Secretary of State

**Current Principal Place of Business:**

949 TAMIAMI TR.  
SUITE 103  
PORT CHARLOTTE, FL 33953

**New Principal Place of Business:**

949 TAMIAMI TR.  
SUITE 101  
PORT CHARLOTTE, FL 33953

**Current Mailing Address:**

203 RUBENS DR.  
APT C  
NOKOMIS, FL 34275

**New Mailing Address:**

FEI Number: 20-3742893      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HOLLISTER, JACQUELINE  
203 RUBENS DR.  
APT C  
NOKIMIS, FL 34275 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: P, S ( ) Delete  
Name: HOLLISTER, JACQUELINE  
Address: 203 RUBENS DR. APT C  
City-St-Zip: NOKOMIS, FL 34275

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JACQUELINE HOLLISTER

MRS

04/16/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date