

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007264

Entity Name: FLYNN CLASSICS, INC.

FILED  
Apr 04, 2005  
Secretary of State

## Current Principal Place of Business:

27255 HICKORY HILL ROAD  
BROOKSVILLE, FL 34602

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 147  
BROOKSVILLE, FL 34605

## New Mailing Address:

FEI Number: 59-3363669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THE HOGAN LAW FIRM, LLC  
20 S BROAD ST  
BROOKSVILLE, FL 34601 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: DP ( ) Delete  
Name: FLYNN, MICHAEL J  
Address: 27255 HICKORY HILL RD  
City-St-Zip: BROOKSVILLE, FL 34602

Title: ST ( ) Delete  
Name: FLYNN, KELLY B  
Address: 27255 HICKORY HILL RD  
City-St-Zip: BROOKSVILLE, FL 34602

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL J. FLYNN

PRES

04/04/2005

Electronic Signature of Signing Officer or Director

Date