


**AMENDED**  
**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

FILED

03 OCT 28 PM 1:39

**DOCUMENT # 267510**  
 1. Entity Name  
**Quality Neon Sign Company**



SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>5160 Sunbeam Road</b> Suite, Apt. #, etc.	3. Mailing Address <b>5160 Sunbeam Road</b> Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State <b>Jacksonville, Florida</b>	City & State <b>Jacksonville, Florida</b>
Zip <b>32257</b>	Country <b>USA</b>

4. FEI Number <b>59-1001756</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

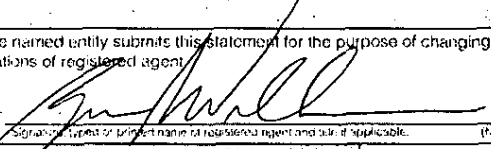
7. Name and Address of Current Registered Agent

Name **Williams, Roger S.**

Street Address (P.O. Box Number is Not Acceptable)  
**13691 Little Harbor Court**

City **Jacksonville** FL Zip Code **32225**

8. 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. I am familiar with, and accept the obligations of registered agent.

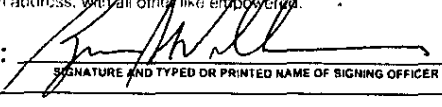
SIGNATURE:  DATE: **10/20/03**

January 1 - May 1 Fee is \$150.00  
 After May 1, Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD Williams, Roger S. 13691 Little Harbor Court Jacksonville, Florida 32225</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD Williams, Sheila F. 13691 Little Harbor Court Jacksonville, Florida 32225</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>300024198663 10/28/03--01032--009 **61.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowerments.

SIGNATURE:  **Roger S. Williams, President** Date: **10/20/03** Daytime Phone #: **904-268-4681**

CR2E034B (12/02)

7 10/30

**ROGERS | TOWERS**

ATTORNEYS AT LAW

Steven E. Marshall, Paralegal

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October 23, 2003

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: Quality Neon Sign Company**

To Whom It May Concern:

On behalf of our client, Quality Neon Sign Company, enclosed please find an Amended Uniform Business Report as well as check number 3120 made payable to the Florida Dept of State for \$61.25.

If you have any questions, please call.

Sincerely,



Steven E. Marshall  
Paralegal

Enclosures