2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# 582412

Entity Name: SIGNS NOW 223, INC.

Current Principal Place of Business:

327 DEVONSHIRE LANE
ORANGE PARK, FL 32073

New Principal Place of Business:

8725 YOUNGERMAN CT.
SUITE 103
JACKSONVILLE, FL 32244

Current Mailing Address:

327 DEVONSHIRE LANE
ORANGE PARK, FL 32073

New Mailing Address:

8725 YOUNGERMAN CT.
SUITE 103
JACKSONVILLE, FL 32244

FEI Number: 59-1848474 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, KATHLEEN
327 DEVONSHIRE LANE
ORANGE PARK, FL 32073 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: PD ( ) Delete
Name: MILLER, KATHLEEN
Address: 327 DEVONSHIRE LANE
City-St-Zip: ORANGE PARK, FL

Title: ST ( ) Delete
Name: HAINES, DEBRA
Address: 750 JAMES CIRCLE
City-St-Zip: LAWRENCEVILLE, GA 30245

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 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: KATHLEEN MILLER PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date