

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F82738

FILED
Jan 09, 2008
Secretary of State

Entity Name: AMPERSAND GRAPHICS, INC.

Current Principal Place of Business:

340 SE SEVILLE STREET
STUART, FL 349942189

New Principal Place of Business:

340 SE SEVILLE STREET
STUART, FL 34994

Current Mailing Address:

P.O. BOX 2189
STUART, FL 34995 US

New Mailing Address:

340 SE SEVILLE STREET
STUART, FL 34994

FEI Number: 59-2193557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, DENNIS W
340 SE SEVILLE ST.
STUART, FL 34994 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: CLARK, DENNIS W
Address: 340 SE SEVILLE ST.
City-St-Zip: STUART, FL

Title: VP () Delete
Name: CLARK, ELAINE D
Address: 340 SE SEVILLE ST.
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CLARK, DENNIS W
Address: 340 SE SEVILLE ST.
City-St-Zip: STUART, FL 34994

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: ELAINE D. CLARK

V.P.

01/09/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date