

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L63174

Entity Name: SCOTT SIGN SYSTEMS, INC.

FILED
Feb 15, 2006
Secretary of State

Current Principal Place of Business:

7524 COMMERCE PL
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1047
TALLEVAST, FL 34270

New Mailing Address:

FEI Number: 65-0200051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: VENKATARAMON, RAVI
Address: 1763 TIMER TRAIL
City-St-Zip: COOKEVILLE, TN 38506

Title: VP () Delete
Name: HANNON, KATHY
Address: 2175 SHADOW OAKS RD
City-St-Zip: SARASOTA, FL 34270

Title: AS () Delete
Name: ABBOTT, STEWART
Address: 8770 49TH TERRACE EAST
City-St-Zip: BRADENTON, FL 34211

Title: P () Delete
Name: EVANS, STEVEN J
Address: 5595 OAK GROVE CT.
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: STRWART ABBOTT

AS

02/15/2006

Electronic Signature of Signing Officer or Director

_____ Date