

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000094852

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** MOTT SIGN CORPORATION

**Current Principal Place of Business:**

479 OLD FLA ST. RD. 10  
VALPARAISO, FL 32580

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 215  
VALPARAISO, FL 32580

**New Mailing Address:**

FEI Number: 59-3124534      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOTT, JACKIE C SR  
479 OLD FLA ST. RD. 10  
VALPARAISO, FL 32580      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

**OFFICERS AND DIRECTORS:**

Title:            PRES  
Name:            MOTT, JACKIE C SR  
Address:        210 GRANDVIEW AVENUE  
City-St-Zip:    VALPARAISO, FL 32580

Title:            VP  
Name:            MOTT, JACKIE C JR  
Address:        218 GRANDVIEW AVENUE  
City-St-Zip:    VALPARAISO, FL 32580

Title:            S/T  
Name:            MOTT, GLENDA E  
Address:        210 GRANDVIEW AVENUE  
City-St-Zip:    VALPARAISO, FL 32580

I hereby 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 all other like empowered.

SIGNATURE: JACKIE C MOTT SR

PRES

04/20/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date