

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90070 006 ***150.00

0614782 AT

DOCUMENT # P96000055603

1. Entity Name
PALM COAST OUTDOOR, INC.

Principal Place of Business C/O LOWE ENTERPRISES, INC. P. O. BOX 354489 PALM COAST FL 32135-4489 US	Mailing Address C/O LOWE ENTERPRISES, INC. 11777 SAN VICENT BLVD STE 900 LA CA 90049 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3389554		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP PLATT, JOHN B III 26 W MICHELTORENA STREET SANTA BARBARA CA 93101-2527 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWE, ROBERT J 11777 SAN VICENTE BLVD. #900 LOS ANGELES CA 90049 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP DEL FRANCO, PETER 11777 SAN VICENTE BLVD. #900 LOS ANGELES CA 90049 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPC DEMARCO, JOHN M 11777 SAN VICENTE BLVD. #900 LOS ANGELES CA 90049 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP WETHE, WILLIAM T 11777 SAN VICENT BLVD STE 900 LOS ANGELES CA 90049 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/SVP/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TALMAGE, LEANNE 11777 SAN VICENT BLVD STE 900 LOS ANGELES CA 90049 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leanne Talmage* **Leanne Talmage Secretary February 1, 2002 310-571-4345**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

ATTACHMENT

DOC# P96000055603

322745

PALM COAST OUTDOOR, INC.
State of Florida
2002 Uniform Business Report (UBR)

12. Additions/Changes to Officers and Directors in 11:

SVP/AS

Robert D. Devore
300 Hammock Dunes Parkway
Palm Coast, FL 32135-4489

SVP

Peter R. O'Keeffe
11777 San Vicente Blvd., #900
Los Angeles, CA 90049

SPV/AS

Salve A. Pennya
11777 San Vicente Blvd., #900
Los Angeles, CA 90049

VP

John R. Hemphill
One Corporate Plaza
Palm Coast, FL 32135-4489

VP

Stuart C. Rockett
300 Hammock Dunes Parkway
Palm Coast, FL 32135-4489

AVP

William C. Vergani
One Corporate Plaza
Palm Coast, FL 32135-4489