## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 669126**

Entity Name: BELL SIGNS, INC.

FILED Jan 02, 2007 Secretary of State

	BELL OIC	110, 1110.				
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
1200 BELL PANAMA	_AVE CITY, FL 3240	1				
Current N	lailing Addres	ss:	New Maili	New Mailing Address:		
1200 BELL PANAMA	_AVE CITY, FL 3240	1				
FEI Number	: 59-1999072	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired (X)	
Name and	d Address of C	Current Registered Agent:	Name and	Address o	f New Registered Agent:	
	, LARRY ACH DR #700 CITY, FL 3240	1 US				
	e named entity : e of Florida.	submits this statement for the	purpose of changing i	ts registere	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electror	nic Signature of Registered Ag	ent		Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PSTD ( ) PRESLEY, LAF 324 E BEACH I PANAMA CITY,	OR #700	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) SIRAGUSA, RC 2802 CANAL D PANAMA CITY,	R	Title: Name: Address: City-St-Zip:	D SIRAGUSA, 2802 CANAI PANAMA CI		
Title: Name: Address: City-St-Zip:	D ( ) RAO, PALEP N 3027 KINGS HA PANAMA CITY,	ARBOUR RD.	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO () STANLEY, LON 797 SKYLAND PANAMA CITY,	AVENUE	Title: Name: Address: City-St-Zip:	797 SKYLAN	(X) Change ( ) Addition ONNIE J CPA ND AVENUE TY, FL 32401	

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: LONNIE STANLEY CFO 01/02/2007