

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90387 020 ***150.00

DOCUMENT # 260687

1. Entity Name
AMERICAN SIGN CO



Principal Place of Business
**5377 ASHTON COURT
SARASOTA, FL 34233**

Mailing Address
**5377 ASHTON COURT
SARASOTA, FL 34233**



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-0977920

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**JONES, LARRY K.
5377 ASHTON CT
SARASOTA FLA., FL 34233**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS/AND DIRECTORS

TITLE	P
NAME	JONES, LARRY K.
STREET ADDRESS	5377 ASHTON CT.
CITY-ST-ZIP	SARASOTA, FL
TITLE	D
NAME	HASTINGS, HERBERT N
STREET ADDRESS	8477 TURNBERRY CIR
CITY-ST-ZIP	SARASOTA, FL 00000, 34241
TITLE	RVP
NAME	JONES, LARRY K.
STREET ADDRESS	5377 ASHTON CT.
CITY-ST-ZIP	SARASOTA, FL
TITLE	ST
NAME	HASTINGS, JOANNE R
STREET ADDRESS	8477 TURNBERRY CIR
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	VP
NAME	HUCK, ALLAN
STREET ADDRESS	5377 ASHTON COURT
CITY-ST-ZIP	SARASOTA, FL 34233
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-05
Date

(941) 921-5511
Daytime Phone #