FILE NOW: FILING FEE AFTER MAY 1 IS $22.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 391473 (6)

1. Corporate Name

MID-FLORIDA SIGN COMPANY, INC.

Principal Place of Business	Mailing Address
1014 PALM VIEW DRIVE P.O. BOX 6163 DAYTONA BEACH FL 32122	1014 PALM VIEW DRIVE P.O. BOX 6163 DAYTONA BEACH FL 32122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/15/1971
3a. Date of Last Report: 06/21/1994

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

City (24) | County (25) | State (29) | Zip (30)

4. FEI Number: 59-1365437 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has activity for intrastate business as defined by Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BEAUCHAMP, NORMAN
1509 PRIMROSE LANE
HOLLY HILL FL 32017

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST	☐ Change ☐ Addition
NAME	BEAUCHAMP, NORMAN	
STREET ADDRESS	1509 PRIMROSE LANE	
CITY ST ZIP	DAYTONA BEACH FL	
TITLE	D	☐ Change ☐ Addition
NAME	BEAUCHAMP, NORMAN	
STREET ADDRESS	1509 PRIMROSE LANE	
CITY ST ZIP	DAYTONA BEACH FL	
TITLE	D	☐ Change ☐ Addition
NAME	BEAUCHAMP, JANET	
STREET ADDRESS	1509 PRIMROSE LANE	
CITY ST ZIP	DAYTONA BEACH FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		

14. I declare I certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Norman T Beauchamp 5/1/95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date

NORMAN T BEAUCHAMP

0403331 FP