

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 391473

(6)

1. Corporation Name

MID-FLORIDA SIGN COMPANY, INC.



Principal Place of Business

1014 PALM VIEW DRIVE
P.O. BOX 6163
DAYTONA BEACH FL 32122

Mailing Address

1014 PALM VIEW DRIVE
P.O. BOX 6163
DAYTONA BEACH FL 32122

3. Date Incorporated or Qualified

11/15/1971

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

4. FEI Number

59-1365437

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

BEAUCHAMP, NORMAN
1509 PRIMROSE LANE
HOLLY HILL FL 32017

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

Signature typed or printed name of registered agent and the incorporator

NOTE: Registered Agent signed on separate sheet heretofore

DATE

12. OFFICERS AND DIRECTORS

TITLE PST
NAME BEAUCHAMP, NORMAN
STREET ADDRESS 1509 PRIMROSE LANE
CITY-ST-ZIP DAYTONA BEACH FL

☐ DELETE

TITLE D
NAME BEAUCHAMP, NORMAN
STREET ADDRESS 1509 PRIMROSE LANE
CITY-ST-ZIP DAYTONA BEACH FL

☐ DELETE

TITLE D
NAME BEAUCHAMP, JANET
STREET ADDRESS 1509 PRIMROSE LANE
CITY-ST-ZIP DAYTONA BEACH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

Norman T. Beauchamp
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

4/28/94
DATE

Daytime Phone #

CR2E034 (12/95)