## 2008 NOT-FOR-PROFIT CORPORAT!ON ANNUAL REPORT

## **FILED** May 01, 2008 8:00 am Secretary of State

05-01-2008 90251 014 \*\*\*\*61.25

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DOCUMENT # 719170	
<ol> <li>Entity Name</li> <li>FLORIDA SIGN ASSOCIATION, INC.</li> </ol>	

Principal Place of Business Mailing Address 1215 ANTHONY AVENUE 1215 ANTHONY AVENUE COLUMBIA, SC 29201 COLUMBIA, SC 29201 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04302008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-3127814 City & State Applied For City & State Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BOYD, MIKE Street Address (P.O. Box Number is Not Acceptable) 3649 PROGRESS AVE. NAPLES, FL 34104 Zip Code 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 Signator, typed or printed name of Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE Change Addition TITLE Delete BOYD, MIKE NAME NAME 3649 PROGRESS AVE STREET ADDRESS STREET ADDRESS NAPLES, FL 34104 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete Addition TITLE YESBECK, PAUL NAME NAME Zin: 33014 540 W. 83 STREET STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP HIALEAH, FL ☐ Delete Change \_\_\_ Addition HOWARD, PATRICE NAME NAME STREET ADDRESS 4493 36TH ST. SOUTHWEST STREET ADDRESS ORLANDO, FL 32811 CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE ☐ Change ☐ Addition TITLE DESIATO, JODY NAME NAME 3985 TAMPA RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OLDSMAR, FL 34677 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE SODAY, KEN NAME NAME 8637 PISA DR #1012 STREET ADDRESS STREET ADDRESS ORLANDO, FL 32810 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. For sentine Director 4/30/

SIGNATURE: .