2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# 840012

Entity Name: MID-WEST LETTERING COMPANY

Current Principal Place of Business:

645 BELLEFONTAINE AVE.
P.O. BOX 628
MARION, OH 43302

New Principal Place of Business:

645 BELLEFONTAINE AVE.
MARION, OH 43302

Current Mailing Address:

645 BELLEFONTAINE AVE.
P.O. BOX 628
MARION, OH 43302

New Mailing Address:

645 BELLEFONTAINE AVE.
P.O. BOX 628
MARION, OH 43301

FEI Number: 31-0794807 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT LYDIA
BOX 15071-7800 SEARS BLVD.
PENSACOLA, FL 32504 US

Name and Address of New Registered Agent:

WRIGHT LYDIA
7800 SEARS BLVD.
PENSACOLA, FL 32504 US

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.

SIGNATURE: 03/27/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: VANCE, RICHARD M
Address: 925 KINGWOOD DR
City-St-Zip: MARION, OH 43302

Title: VPS ( ) Delete
Name: VANCE, MARLA
Address: 925 KINGWOOD DR
City-St-Zip: MARION, OH 43302

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BARBARA A. ARMS COMP 03/27/2009
Electronic Signature of Signing Officer or Director — Date