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 # **F92000000503 (4)**

1. Corporation Name
SIGN CRAFT, INC.

Principal Place of Business	Mailing Address
1890 CHURCH ST W PALM BCH FL 33409 US	3210 EAST 96TH ST. INDIANAPOLIS IN 46240

3. Date Incorporated or Qualified: **12/03/1992**
3a. Date of Last Report: **04/04/1995**

2. Principal Place of Business
21: 8355 Garden Road
22: Suite, Apt. #, etc.
23: City & State: Riviera Beach FL
24: Zip: 33404
25: Country: US

2a. Mailing Address
26:
27: Suite, Apt. #, etc.
28: City & State
29: Zip
30: Country

4. FEI Number: **65-0342134** ☐ 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 liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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 _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	YOUNG, DAN E		1.2 NAME		
STREET ADDRESS	1550 S OCEAN BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MANALAPAN FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	YOUNG, ALAN V		2.2 NAME		
STREET ADDRESS	3210 EAST 96TH ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	INDIANAPOLIS IN 46240		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	YOUNG, WILLIAM A		3.2 NAME		
STREET ADDRESS	3210 EAST 96TH ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	INDIANAPOLIS IN 46240		3.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	GOTLIB, SUMMER		4.2 NAME		
STREET ADDRESS	1674 RYE TERR		4.3 STREET ADDRESS		
CITY-ST-ZIP	WELLINGTON FL		4.4 CITY-ST-ZIP		
TITLE	TP	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	PRUSIECKI, LINDA M		5.2 NAME		
STREET ADDRESS	1890 CHURCH ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		5.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	CHENOWETH, JAN R		6.2 NAME		
STREET ADDRESS	3210 EAST 96TH ST.		6.3 STREET ADDRESS		
CITY-ST-ZIP	INDIANAPOLIS IN 46240		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Jan C Chenoweth 4/28/96 317-577-2413
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)