

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004300

Entity Name: KORMAN SIGNS, INC.

FILED  
Jan 23, 2009  
Secretary of State

## Current Principal Place of Business:

3029 LINCOLN AVE  
RICHMOND, VA 23228

## New Principal Place of Business:

## Current Mailing Address:

3029 LINCOLN AVE  
RICHMOND, VA 23228

## New Mailing Address:

FEI Number: 54-0993439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAUR, MILLER & WEBNER, P.A.  
21ST FLR, NEW WORLD TOWER  
100 N BISCAYNE BLVD  
MIAMI, FL 331322306 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCPT ( ) Delete  
Name: KORMAN, W M  
Address: 5537 CHARLES CITY RD  
City-St-Zip: RICHMOND, VA 23231

Title: S ( ) Delete  
Name: KORMAN, DIANE A  
Address: 5537 CHARLES CITY RD  
City-St-Zip: RICHMOND, VA 23231

Title: VPO ( ) Delete  
Name: MCDONOUGH, DALE P  
Address: 9040 COLONIAL LANE  
City-St-Zip: MECHANICSVILLE, VA 23111

Title: VPS ( ) Delete  
Name: MURRAY, JOHN A  
Address: 5069 OLD TRAVELLER LA.  
City-St-Zip: MECHANICSVILLE, VA 23111

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: W. M. KORMAN

DCPT

01/23/2009

Electronic Signature of Signing Officer or Director

Date