

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G63904

Entity Name: WEST CENTRAL SIGNS, INC.

FILED
Jan 16, 2007
Secretary of State

Current Principal Place of Business:

7720 US HWY 301 NORTH
TAMPA, FL 336373763

New Principal Place of Business:

Current Mailing Address:

7720 US HWY 301 NORTH
TAMPA, FL 336373763

New Mailing Address:

FEI Number: 59-2328626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POWELL, THERESA M.
1006 SONATA LANE
APOLLO BEACH, FL 33572 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: ST () Delete
Name: POWELL, THERESA M
Address: 1006 SONATA LANE
City-St-Zip: APOLLO BEACH, FL 33572

Title: D () Delete
Name: POWELL, THERESA M
Address: 1006 SONATA LANE
City-St-Zip: APOLLO BEACH, FL 33572

Title: P () Delete
Name: POWELL, DANIEL V
Address: 1006 SONATA LANE
City-St-Zip: APOLLO BEACH, FL 33572

Title: VP () Delete
Name: POWELL, ROBERT D
Address: 1711 WOODHAVEN ROAD
City-St-Zip: BRANDON, FL 33510

Title: D () Delete
Name: POWELL, ANDREW S
Address: 11105 LAKE TAHOE
City-St-Zip: RIVERVIEW, FL 33569

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: VP (X) Change () Addition
Name: POWELL, ROBERT D
Address: 535 JAMESON ROAD
City-St-Zip: LITHIA, FL 33547

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

I hereby certify that the information supplied with this filing does not qualify for the 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: THERESA M POWELL

ST

01/16/2007

Electronic Signature of Signing Officer or Director

_____ Date