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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H33782

(4)

GENERAL SIGN CO., INC.

Principal Place of Business

FILED Apr 21 1997 8:00am Secretary of State

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## DIAN M. STOKEY 941 W. JEFFERSON ST. BROOKSVILLE FL 34601 2. Principal Place of Business 2e. Mailing Address 2f. Suite, Apt. #, etc. 27 City & State City & State Zip Country Sinis corporation has Florida Statutes	O5/01/1996 Applied For Not Ap
12/07/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21	O5/01/1996 Applied For Not Ap
26 59-2553243 Sulte, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State Country Zip Country St. This corporation has	Not Applicable \$8.75 Additional Fee Required Financing \$5.00 May Be Added to Fees s liability for intangible tax under s. 199.032,
Sulte, Apt. #, etc. 22 City & State Country Country Country 8. This corporation has	S Desired \$8.75 Additional Fee Required Financing \$5.00 May Be Added to Fees Is liability for intangible tax under s. 199.032,
22	Financing \$5.00 May Be Added to Fees s liability for intangible tax under s. 199.032,
23 Zip Country Zip Country 8. This corporation has	ution Added to Fees s liability for intangible tax under s. 199.032,
Zip Country Zip Country 8. This corporation has	ution Added to Fees s liability for intangible tax under s. 199.032,
L , ' l , ' ilis corporation has	
24 25 29 30 Florida Statutes	Von Miller
	Yes 💹 No
	s of New Registered Agent
STOKEY, DIAN M. 81 Name	
941 W JEFFERSON ST 82 Street Address (P.O. Box Number is N	Not Acceptable)
BROOKSVILLE FL 34601	
83	
84 City	85 Zip Code
[Oily	FL 85 Zip Code
SIGNATURE Signature, typod or printed name of registered agent and tille if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
	ES TO OFFICERS AND DIRECTORS IN 12
STOVEY OUR D	Change Addition
A44 W JEEEDOON OT	
DOOMAN E	
1.1 Ol. O. I.I	
	Change Addition
NAME STOKEY, DIAN M. 22 NAME STREET ADDRESS 941 W JEFFERSON ST 23 STREET ADDRESS	
PRODUCIBLE EL	· ·
CITY-ST-ZIP BROOKSVILLE FL 2. 4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE	Change Addition
NAME 3.2 NAME	
STREET ADDRESS 33 STREET ADDRESS	
CITY-ST-ZIP 34.CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
01Y-\$1-ZIP 4.4 CIY-\$1-ZIP	
TITLE DELETE 5.1 TITLE	Change Addition
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CTY-\$1-ZIP 54 CITY-\$1-ZIP	
TITLE DELETE 61 TITLE	Change Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-\$1-ZIP 6.4 CITY-\$1-ZIP 6.4 CITY-\$1-ZIP 1.4 Lide hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07/3)(i). Fir	

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 eath; 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 pn an attachment with an address.