2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2006 08:00 AM
Secretary of State

DOCUMENT # H44334

1. Entity Name
ADMARK SIGNS AND GRAPHICS, INCORPORATED

Principal Place of Business	Mailing Address
1924 BRENGLE AVE ORLANDO, FL 32808 US	1924 BRENGLE AVE ORLANDO, FL 32808 US

02092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2499503
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COONEY, RICHARD PATRICK
2180 TURKEY RUN
WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	COONEY, RICHARD PATRICK
STREET ADDRESS	2180 TURKEY RUN
CITY-ST-ZIP	WINTER PARK, FL
TITLE	PD
NAME	HUFFMAN, PATRICIA ANN
STREET ADDRESS	766 ASHLEY LANE
CITY-ST-ZIP	ORLANDO, FL
TITLE	VD
NAME	HUFFMAN, WILLIAM JOSEPH
STREET ADDRESS	766 ASHLEY LANE
CITY-ST-ZIP	ORLANDO, FL
TITLE	VD
NAME	HUFFMAN, MICHAEL THOMAS
STREET ADDRESS	640 B MCDUFF LANE
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	TD
NAME	COONEY, PATRICIA GAIL
STREET ADDRESS	2180 TURKEY RUN
CITY-ST-ZIP	WINTER PARK, FL
TITLE	VD
NAME	HUFFMAN, WILLIAM CRONE
STREET ADDRESS	766 ASHLEY LN
CITY-ST-ZIP	ORLANDO, FL

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02/24/06-80047-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia A. Huffman PATRICIA A. HUFFMAN 2-9-06 407-291-8947
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #