

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H48149

FILED
Jan 23, 2004
Secretary of State

Entity Name: MAGEE SIGN SERVICE, INC.

Current Principal Place of Business:

1604 18TH AVE DR E
PALMETTO, FL 34221 US

New Principal Place of Business:

1511 20TH AVE EAST
PALMETTO, FL 34221 US

Current Mailing Address:

1604 18TH AVE DR E
PALMETTO, FL 34221 US

New Mailing Address:

1511 20TH AVE EAST
P O BOX 1298
PALMETTO, FL 34221 US

FEI Number: 59-2525558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRNE, DENNIS M SR
11311 28TH ST. CIR. EAST
PARRISH, FL 34219 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: P () Delete
Name: HOIBY, JOHN R SR
Address: 4210 IRONWOOD CIRCLE, UNIT 107
City-St-Zip: BRADENTON, FL 34209

Title: VP () Delete
Name: HOLBY, KATHALINE L
Address: 4210 IRONWOOD CIRCLE, UNIT 107
City-St-Zip: BRADENTON, FL 34209

Title: VP () Delete
Name: BYRNE, JOAN E
Address: 11311 28TH ST. CIR. EAST
City-St-Zip: PARRISH, FL 34219

Title: ST () Delete
Name: BYRNE, DENNIS M SR
Address: 11311 28TH ST. CIR. EAST
City-St-Zip: PARRISH, FL 34219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOIBY, JOHN R SR
Address: 11407 28TH ST. CIR. EAST
City-St-Zip: PARRISH, FL 34219

Title: VP (X) Change () Addition
Name: HOLBY, KATHALINE L
Address: 11407 28TH ST. CIR. EAST
City-St-Zip: PARRISH, FL 34219

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 for the exemption stated in Section 119.07(3)(i), 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: DENNIS M BYRNE SR

SEC/

01/23/2004

Electronic Signature of Signing Officer or Director

_____ Date