FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H50246

(8)

NITE-BRIGHT SIGN COMPANY, INC.

FILED	
Mar 28 1997 8:00am	ì
Secretary of State	

TERMINATERIA	BOLLS HALL SIDIS	ALIA BIEN GLEN BLEN	A DIGIN BARIL DERIK ING
		3 14 3131 3 14 614 614	

16061 PINE RIL FT MYERS FL 2. Principal F	= -	Mailing Address C/O DAVID W. MATHEY. 18061 PINE RIDGE ROAL FT MYERS FL 33908-263	D		3. Date Incorporated or Qualified 04/01/1985 4. FEI Number		e of Last	Report
21		26			06-0755096		<u> </u>	Not Applicable
Suite, Apt.	. #. etc:	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional Required
City & Stal	te	City & State			6. Election Campaign Financing	* **	\$5.00	0 May Be
23		28			Trust Fund Contribution			d to Fees
Zφ	Country	Zip	Country	/	8. This corporation has liability for #			s. 199.032,
24	25	29	30			Yes 🔲		
	9. Name and Address of Curre	ent Registered Agent		T :.	10, Name and Address of New Reg	lstered Ag	<u>jent</u>	
	THEY, DAVID W., SR.		81	Name				
	e ridge road		82	Street Add	ress (P.O. Box Number is Not Acceptabl	e)		
FT N	MYERS FL		<u> </u>					
			83					
: 			84	City			85 Zip	p Code
			64	City		FL	00 21	Code
12.		ND DIRECTORS	13.	eni signature requ	pired when reinstating) ADDITIONS/CHANGES TO OFFIC			
THUE	PD MATHEY, DAVID W., SR.	L) DELETE	11 TITLE	1		L.	Change	Addition
NAME	ALCO MATERIATION I AND		1.2 NAME					
STREET ADDRESS			R 13STRFF					
	CANIDEI EI			T ADDRESS				
CITY - ST - ZIP	SANIBEL FL	T DELETE	1.4 CITY-				Change	Addition
TITLE	DS	DELETE	1.4 CITY-: 2.1 TITLE			L	Change	Addition
TITLE NAME	DS MATHEY, AGNES W.	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME	ST-ZIP		Ţ	Change	Addition
TILE NAME STREET ADDRESS	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE	☐ DELETE	1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE	ST-ZIP		Ţ	Change	Addition
TITLE NAME STREEL ADDRESS CHY+S1-ZIP	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL	_	1.4 CITY-: 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ST-ZIP			Change Change	
TITLE NAME STREEL ADDRESS CITY - ST. ZIP TITLE	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV	☐ DELETE	1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY 3.1 TITLE	ST-ZIP F ADDRESS ST-ZIP				
THE NAME STREET ADDRESS CITY STORE THE NAME	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR.	_	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ST-ZIP I ADDRESS ST-ZIP				
THE NAME STREEL ADDRESS CHY-ST ZIP THEF NAME STREEL ADDRESS	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE	_	1.4 CITY- 2 1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE	ST-ZIP I ADDRESS ST-ZIP I ADDRESS				
THE NAME STREEL ADDRESS CITY STEEL THE NAME	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR.	_	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ST-ZIP I ADDRESS ST-ZIP I ADDRESS				e Addition
TILE NAME STREEL ADDRESS CITY-ST-ZIP THEF NAME STREEL ADDRESS CITY-ST-ZIP	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL	☐ DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY-	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	- AND		Change	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TABLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M.	☐ DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP			Change	e Addition
TILE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M.	☐ DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP			Change	e Addition
TILE NAME STREET ADDRESS CITY-ST-ZIP TOTE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M. 3644 LIBERTY SQUARE	☐ DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS OTY-ST-ZIP TOTE NAME STREET ADDRESS OTY-ST-ZIP TITLE NAME STREET ADDRESS OTY-ST-ZIP TITLE NAME STREET ADDRESS OTY-ST-ZIP	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M. 3644 LIBERTY SQUARE	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP			Change	Addition
TILE NAME STREEL ADDRESS CITY ST ZIP TITLE NAME STREEL ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS CITY ST ZIP TITLE	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M. 3644 LIBERTY SQUARE FT. MYERS FL	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP			Change	Addition
TILE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP PILE NAME	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M. 3644 LIBERTY SQUARE FT. MYERS FL	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP			Change	Addition
TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M. 3644 LIBERTY SQUARE FT. MYERS FL	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP			Change	Addition Addition
TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M. 3644 LIBERTY SQUARE FT. MYERS FL	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP J ADDRESS ST-ZIP			Change Change	Addition Addition Addition
TILE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ATORESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE	DS MATHEY, AGNES W. 4453 WATERSEDGE LANE SANIBEL FL DV MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL FL DT WRIGHT, KATHERINE M. 3644 LIBERTY SQUARE FT. MYERS FL	DELETE	1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE 6.2 NAME	ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP J ADDRESS ST-ZIP			Change Change	Addition Addition Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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 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 12 or Block 13 if changed, or on an attachment with an address.

IGNATURE:

3/24/90 941-466-261