2006 FOR PROFIT CORPORATION

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ANNUAL REPORT				Mar 22, 2006 08:00		
DOCUMENT # H50246 1. Entity Name						etary of Stat
	IGHT SIGN COMPANY, INC.					
C/O DAVID W 16061 PINE	Incipal Place of Business O DAVID W. MATHEY, JR. C/O DAVID W. MATHEY, JR. S061 PINE RIDGE ROAD TMYERS, FL 33908-9634 FT MYERS, FL 33908-9634 Mailing Address C/O DAVID W. MATHEY, JR. 16061 PINE RIDGE ROAD FT MYERS, FL 33908-9634		~			
DO NOT WRITE IN THIS SPA			CE	02242006 4. FEI Numb 06-075	No Chg-P C er 5096	CR2E034 (11/05) Applied For Not Applicable
	6. Name and Address of Current Reg	sistered Agent		5. Certificate	of Status Desired [Fee Required
MATHEY, DAVID W JR PINE RIDGE ROAD FT MYERS, FL			DO NOT WRITE IN THIS SPACE			
8. The above the obligat SIGNATURE.	named entity somits this statement for the tions of registered agent.	ralley h	ed office or register		th, in the State of Florida	. I am familiar with, and accept
		Election Campaign Final Trust Fund Contribution.		.00 May Be ed to Fees	1)000004 04/06/06-81	76811 3026-008 150.00
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIR VD WRIGHT, BRUCE A 3799 LIBERTY SQUARE FORT MYERS, FL 33908 VD MATHEY, LINDA H 1309 SEASPRAY LANE SANIBEL, FL 33957 PD MATHEY, DAVID W., JR. 1309 SEASPRAY LANE SANIBEL, FL 33957 STD	ECTORS			NOT WR	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	STD WRIGHT, KATHERINE M. 3799 LIBERTY SQUARE FORT MYERS, FL 33908			IN T	THIS SPA	CE
STREET ADDRESS.			1			

12. I hereby certify that the information supplied with this filling 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 officers with all other like empowered.

TITLE ... NAME

STREET ADDRESS

THE OF US PERKYONE

SIGNATURE: VIEW WWW MUNICIPALITY OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

DAVIDOW. MATHEY JR G OFFICER OR DIRECTOR

239-466-266

الوالأخار بها متمحم السيميان العطط بالهيبالا والوال ويان

Daytime Phone #