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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

SIGN TALK, INC.

•

Principal Place of Business

Mailing Address

ADAD CHRIDEAN DO AA

FILED Apr 27 1998 8:00am Secretary of State

MROBERT V. JACKSONVILI	DUSS	MROBERT V. DUSS JACKSONVILLE FL 32257		DO NOT WRITE IN THIS SPACE				
					3. Date incorporated or Qualified 09/28/1988			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		plied For	
21	⊢ ¬			59-2911488		_ —	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & State City & State			···	6. Election Campaign Financing		·		
23		28	ן ,		Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Z ₁ p Country		8. This corporation owes or has paid the current year Intangible			
24	25	29	30 Personal Property Tax due June 30. Yes No					
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
	CHARDSON, MARK		81	Name				
922 CARNOUSTIE LANE		82	82 Street Address (P.O. Box Number is Not Acceptable)					
JA	JAX FL 32256							
			84	- 7	FL	'	Code	
11. Pursuant to office or reagent. I as	o the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, F	ites, the above authorized b lorida Statute	re-named co by the corporates.	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	changing it ointment as	s registered registered	
SIGNATURE .					puired when reinstating) DATE			
12,	Signature, typed or printed name of registered age OFFICERS AN		13.	jeni eignature red	ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12	
TITLE	D	DELETE	1.1 TOTLE		ADDITIONAL AND TO STITUTE AND	Change	Addition	
NAME	RICHARDSON, MARK S.	_	1.2 NAME					
STREET ADDRESS	9229 CARNOUSTIE LN		1.3 STREET ADDRESS] [
CITY-ST-ZIP	JAX FL		1.4 CITY-					
TITLE	D	☐ DELETE	2.1 TITLE			Change	Addition	
NAME	RICHARDSON, SUSAN S.		2.2 NAME					
STREET ADDRESS	9229 CARNOUSTIE LN		2.3 STREET ADDRESS					
CITY-ST-ZIP	JAX FL		2 4 CITY	- ST - ZIP				
TITLE	AS	DELETE	3.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	DUSS, ROBERT V.		3.2 NAME					
STREET ADDRESS			T ADDRESS]		
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CITY	ST-ZIP				
TITLE	VP	L DELET e	DELETE 4.1 TITLE			☐ Change	☐ Addition	
NAME	BOWSER, RICHARD		4. 2 NAM					
STREET ADDRESS	12374 TEAL RUN COURT			T ADDRESS				
CITY-ST-ZIP	JACKSONMLLE FL	Deter	4.4 CITY-	ST - ZIP		[] Chase:	Addition	
TITLE		DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS			1	
CITY-ST-ZIP TITLE	<u> </u>	☐ DELET E	5.4 CITY- 6.1 TITLE	SI-ZIP		Change	Addition	
NAME			6.1 HILE 6.2 NAME			C orange	- rodition	
STREET ADDRESS								
	6.3 STREET ADDRESS 6.4 CITY - ST - ZIP				1			
CITY-ST-ZIP			6.4 till Y -	91-715	·····			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this annual report or supplemental annual copyr is together and factoring 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 receiper or have composed 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 attatument with an address.