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FILED

Jan 27 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K84564 (9)

1. Corporation Name  
OUTDOOR DEVELOPMENTAL SIGNS, INC.

Principal Place of Business

% SCOTT M. CARTER  
6350 SLATER MILL WAY  
N FT MYERS FL 33917

Mailing Address

P.O. BOX 3648  
N. FORT MYERS FL 33918-3648  
US



3. Date Incorporated or Qualified  
04/27/1989

3a. Date of Last Report  
05/01/1996

4. FEI Number

59-1354190

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

CARTER, SCOTT M.  
6350 SLATER MILL WAY  
N FT MYERS FL 33917

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP

PVS  
CARTER, SCOTT M.  
6350 SLATER MILL WAY  
N FT MYERS FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP

TD  
CARTER, SCOTT M.  
6350 SLATER MILL WAY  
N FT MYERS FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE NAME STREET ADDRESS CITY- ST- ZIP

PVS  
CARTER, SCOTT M.  
21600 NALLE RD.  
N. FT MYERS FL

2.1 TITLE NAME STREET ADDRESS CITY- ST- ZIP

TD  
CARTER, SCOTT M.  
21600 NALLE RD.  
N. FT. MYERS FL

3.1 TITLE NAME STREET ADDRESS CITY- ST- ZIP

3.2 TITLE NAME STREET ADDRESS CITY- ST- ZIP

4.1 TITLE NAME STREET ADDRESS CITY- ST- ZIP

4.2 TITLE NAME STREET ADDRESS CITY- ST- ZIP

5.1 TITLE NAME STREET ADDRESS CITY- ST- ZIP

5.2 TITLE NAME STREET ADDRESS CITY- ST- ZIP

6.1 TITLE NAME STREET ADDRESS CITY- ST- ZIP

6.2 TITLE NAME STREET ADDRESS CITY- ST- ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/97

941-543-4004

Date

Daytime Phone #

CR2E034 (9/96)