FILED
Apr 18, 2005 8:00 am
Secretary of State

03-07-2005 90058 039 ****50.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000013490

1. Entity Name
THE SIGN SHOP, LLC

Principal Place of Business	Mailing Address
1925 SOUTH 14TH STREET FERNANDINA BEACH, FL 32034	1925 SOUTH 14TH STREET FERNANDINA BEACH, FL 32034
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

03012005 Chg-LLC CR2E083 (10/03)

20-0752392-262306

4. FEI Number: 20-0752392-262306 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COURSON & STAM, LLC 2398 SADLER ROAD FERNANDINA BEACH, FL 32024	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00 Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOSHER, EDWIN 2056 ORCA COURT FERNANDINA BEACH, FL 32034	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOSHER, LESSIE 2056 ORCA COURT FERNANDINA BEACH, FL 32034	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Edwin Mosher 3-3-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

FTD ADDRESS CHANGE

An address change here changes your address on the FTD coupons only.

ATTACHMENT #L0400003490

3003574

Employer Identification Number (EIN)

OMB No. 1545-0257

20-0752392 262306 4 3

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SIGN SHOP LLC
MOSHER ED SOLE MEMBER
1925 S 14TH ST
FERNANDINA FL 32034-4431

New Address _____

_____

_____

City _____

State _____ Zip _____

Telephone Number ( ) _____

TEAR OFF HERE

Do not write beyond this line

INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201

Send FTD Address Change and correspondence to the IRS address above.

Form 8109-C (Rev. 12-2002)