


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000013490 1. Entity Name THE SIGN SHOP, LLC	
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Principal Place of Business 1925 SOUTH 14TH STREET FERNANDINA BEACH, FL 32034	Mailing Address 1925 SOUTH 14TH STREET FERNANDINA BEACH, FL 32034
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DO NOT WRITE IN THIS SPACE



01292008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0752392	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent COURSON & STAM, LLC 2398 SADLER ROAD FERNANDINA BEACH, FL 32024
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	U000000837434 03/04/08-80057-016 138.75
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOSHER, EDWIN 2056 ORCA COURT FERNANDINA BEACH, FL 32034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOSHER, LESSIE 2056 ORCA COURT FERNANDINA BEACH, FL 32034
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Edwin T Mosher</u> <u>EDWIN T MOSHER</u> <u>2-19-08</u>	
SIGNATURE: <u>Lessie M. Mosher</u> <u>Lessie M. Mosher</u> <u>2/19/08</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>