

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 20, 2007 8:00 am**  
**Secretary of State**

02-20-2007 90050 041 \*\*\*150.00

DOCUMENT # L26927

1. Entity Name  
 BOARDWORKS OUTDOOR ADVERTISING COMPANY, INC.



Principal Place of Business  
 1211 WILLIAMS ST  
 2ND FLOOR  
 ATLANTA, GA 30309 US

Mailing Address  
 2720 COLONIAL DR. NE  
 TUSCALOOSA, AL 35404 US

40021430



01022007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3060100	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOROWITZ, MITCHELL I  
 501 E. KENNEDY BLVD.  
 SUITE 1700  
 TAMPA, FL 33602

**DO NOT WRITE IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBERTS, LAWRENCE A JR. 27 ROANOKE AVE ATLANTA, GA 30305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS JUNKIN, MARTHA 2720 COLONIAL DR. NE TUSCALOOSA, AL 35404
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. 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 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 address with all other like empowered.

SIGNATURE: Martha Junkin MARTHA Junkin x Secretary 877-862-6273  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #