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FILED

Feb 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M87841 (6)

1. Corporation Name  
1ST CHOICE GRAPHIX & SIGN COMPANY

Principal Place of Business

4207 S HOPKINS AVE  
TITUSVILLE FL 32780

Mailing Address

4207 S HOPKINS AVE  
TITUSVILLE FL 32780



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/27/1988

4. FEI Number

59-2895553

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 4207 S. HOPKINS AVE

Suite, Apt. #, etc.

22 City & State

23 TITUSVILLE FL

24 Zip 32780

25 Country USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

WHATLEY, ROBERT C.  
4207 S HOPKINS AVE  
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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]*

PROS.

2/16/98

Signature typed or printed name of registered agent and that of applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~PROS~~ ☐ DELETE

NAME D WHATLEY, ROBERT  
STREET ADDRESS 23488 LLEWELLYN RD.  
CITY-ST-ZIP CHRISTMAS FL

TITLE ~~V.P~~ ☐ DELETE

NAME D WHATLEY, DAVID C.  
STREET ADDRESS P.O. BOX 344 N/A  
CITY-ST-ZIP CHRISTMAS FL

TITLE ~~PROS~~ ☐ DELETE

NAME ~~VALERIE A WHATLEY~~  
STREET ADDRESS ~~PO BOX 344~~  
CITY-ST-ZIP ~~CHRISTMAS FL 32709~~

TITLE ~~SEC.~~ ☐ DELETE

NAME ~~KAREN WHATLEY~~  
STREET ADDRESS ~~PO BOX 508~~  
CITY-ST-ZIP ~~CHRISTMAS FL 32709~~

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME TREASURER  
1.3 STREET ADDRESS WHATLEY, VALERIE A  
1.4 CITY-ST-ZIP 402 N. P. CHRISTMAS RD.  
CHRISTMAS FL 32709

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME SEC.  
2.3 STREET ADDRESS WHATLEY, KAREN D.  
2.4 CITY-ST-ZIP 23488 LLEWELLYN RD  
CHRISTMAS FL 32709

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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]*

2/16/98 467 383 4635

CP2E034 (10/97)