## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000040518

Entity Name: FLEMING SIGNS & GRAPHICS, INC.

**FILED** Apr 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5627 VERNA BLVD., SUITE 8 2494 BLANDING BLVD. JACKSONVILLE, FL 32205

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MIDDLEBURG, FL 32068

**Current Mailing Address: New Mailing Address:** 

5627 VERNA BLVD., SUITE 8 2494 BLANDING BLVD. JACKSONVILLE, FL 32205

MIDDLEBURG, FL 32068

FEI Number: 59-3641401 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLEMING, DAVE FLEMING, DAVE 5627 VERNA BLVD., SUITE 8 4037 COÚNTRY MEADOWS DRIVE

JACKSONVILLE, FL 32205 US MIDDLEBURG, FL 32068

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.

SIGNATURE: 04/20/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

MIDDLEBURG, FL 32068

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete Title: (X) Change ( ) Addition

City-St-Zip:

MIDDLEBURG, FL 32068

Title: FLEMING, WILLIAM D FLEMING, WILLIAM D Name: Name:

5627 VERNA BLVD., SUITE 8 4037 COUNTRY MEADOWS DRIVE Address: Address:

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: MIDDLEBURG, FL 32068

Title: Title: MRS (X) Change ( ) Addition () Delete Name: FLEMING, SUZETTE M Name: FLEMING, SUZETTE M 4037 COUNTRY MEADOWS DR Address: 4037 COUNTRY MEADOWS DR Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUZETTE FLEMING MRS 04/20/2009