

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 15, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000049626**

1. Entity Name

SIGNS NOW HOLDINGS, CORP.



Principal Place of Business

4900 MANATEE AVE WEST  
STE 201  
BRADENTON, FL 34209

Mailing Address

4900 MANATEE AVE WEST  
STE 201  
BRADENTON, FL 34209

**DO NOT WRITE IN THIS SPACE**



02102004 No Chg-P CR2E034 (10/03)

4. FEI Number

65-1178380

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BEYER, DAVID A  
C/O PIPER RUDEWICK LLP  
101 E. KENNEDY BLVD. SUITE 200  
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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000087266  
03/15/04-00004-012-150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	BEYER, DAVID A
STREET ADDRESS	101 E. KENNEDY BLVD., SUITE 2000
CITY - ST - ZIP	TAMPA, FL 33602
TITLE	V
NAME	CORONA, RANDY
STREET ADDRESS	4900 MANATEE AVE WEST STE 201
CITY - ST - ZIP	BRADENTON, FL 34209
TITLE	DPST
NAME	ETCHIESON, MICHAEL L
STREET ADDRESS	4900 MANATEE AVE WEST STE 201
CITY - ST - ZIP	BRADENTON, FL 34209
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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 exemption stated in Section 119.07(3)(f), 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 an other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/10/04  
Date

941-747-7747  
Daytime Phone #