

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P02909

1. Entity Name
RAINBOW NEON SIGN COMPANY, INC.



Principal Place of Business
1306 E. DURST AVE
GREENWOOD, SC 29649

Mailing Address
P.O. BOX 712 N/A
GREENWOOD, SC 29648



04282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
57-0292861

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**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, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HARMON, JAMES C.
STREET ADDRESS	P.O. BOX 712 N/A
CITY-ST-ZIP	GREENWOOD, SC
TITLE	S
NAME	BROWN, GERALD A
STREET ADDRESS	PO BOX 712
CITY-ST-ZIP	GREENWOOD, SC
TITLE	VD
NAME	HARMON, CLYDE
STREET ADDRESS	P.O. BOX 712 N/A
CITY-ST-ZIP	GREENWOOD, SC
TITLE	D
NAME	HARMON, JAMES B.
STREET ADDRESS	P.O. BOX 712 N/A
CITY-ST-ZIP	GREENWOOD, SC
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/27/08-80082-009 158.75

**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:

Gerald A Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/08
Date

864-223-8423
Daytime Phone #