2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085709

Entity Name: SIGNS BY YOU, INC.

FILED May 02, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
494 SW BLAYLOCK CT LAKE CITY, FL 32024			162 SW SPENCER CT LAKE CITY, FL 32024			
Current Mailing Address:			New Mailing Address:			
494 SW BLAYLOCK CT LAKE CITY, FL 32024			162 SW SPENCER CT LAKE CITY, FL 32024			
FEI Number: 20-0131844 FEI Number Applied For () FEI Number		ber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
LAURA, WILLEMS A 494 SW BLAYLOCK CT LAKE CITY, FL 32024 US			WILLEMS, LAURA A 494 SW BLAYLOCK CT LAKE CITY, FL 32024 US			
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: LAURA A WILLEMS					05/02/2005	
Electronic Signature of Registered Agent Date						
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () SHANE, WILLEN 494 SW BLAYLO LAKE CITY, FL	OCK CT	Title: Name: Address: City-St-Zip:	P (X) C WILLEMS, SHAN 494 SW BLAYLO LAKE CITY, FL 3	СК СТ	
Title: Name: Address: City-St-Zip:	VP () BERNARD, WIL 494 SW BLAYLO LAKE CITY, FL	OCK CT	Title: Name: Address: City-St-Zip:	VP (X) C MCGEE, RURME RT 10 BOX 526W LAKE CITY, FL 3	V	
Title: Name: Address: City-St-Zip:	T () LAURA, WILLEN 494 SW BLAYLO LAKE CITY, FL	OCK CT	Title: Name: Address: City-St-Zip:	S/T (X) C WILLEMS, LAUR 494 SW BLAYLO LAKE CITY, FL 3	ск ст	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	T () C KIRSCH, ALEX 121 SW DANTE I LAKE CITY, FL 3		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	S () C KIRSCH, JEFF RT 22 BOX 906 LAKE CITY, FL 3	Change (X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAURA A WILLEMS S/T 05/02/2005