

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147798

Entity Name: GULF COAST SIGN SERVICE, INC

FILED
Sep 07, 2007
Secretary of State

Current Principal Place of Business:

10313 OLD HILLSBOUGH
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 96
MANGO, FL 33550 US

New Mailing Address:

PO BOX 686
BROOKSVILLE, FL 34605 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKS, JOHN M
P.O.BOX 96
MANGO, FL 33550 US

Name and Address of New Registered Agent:

WEEKS, JOHN M
10313 OLD HILLSBOROUGH AVE
TAMPA, FL 33610 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:

09/07/2007

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:

Title: P () Delete
Name: WEEKS, JOHN M III
Address: 10311 OLD HILLSBOROUGH AVE
City-St-Zip: TAMPA, FL 33610

Title: SEC () Delete
Name: WEEKS, GOLDIE S
Address: P.O. BOX 686
City-St-Zip: BROOKSVILLE, FL 34605 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEEKS, JOHN M III
Address: 10313 OLD HILLSBOROUGH AVE
City-St-Zip: TAMPA, FL 33610

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: NEWMAN, WILLIAM
Address: P.O. BOX 9083
City-St-Zip: MASARYKTOWN, FL 34604

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: WILLIAM NEWMAN

VP

09/07/2007

Electronic Signature of Signing Officer or Director

Date