

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000027729

Entity Name: LOCKRIDGE SIGNS INC

FILED  
May 01, 2005  
Secretary of State

## Current Principal Place of Business:

1773 RIVERWATCH BLVD  
TARPON SPRINGS, FL 34689 US

## New Principal Place of Business:

## Current Mailing Address:

1773 RIVERWATCH BLVD  
TARPON SPRINGS, FL 34689

## New Mailing Address:

FEI Number: 20-0710179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MAGINNES, MARILYN  
1773 RIVERWATCH BLVD  
TARPON SPRINGS, FL 34689 US

## Name and Address of New Registered Agent:

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:

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: HAMILTON, ARTHUR  
Address: 3006 NORTHFIELD BLVD  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: VP ( ) Delete  
Name: SCHLICHTE, HENRY  
Address: 622 WISPERING LAKES BLVD  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: S, T ( ) Delete  
Name: MAGINNES, WILLARD  
Address: 1773 RIVERWATCH BLVD  
City-St-Zip: TARPON SPRINGS, FL 34689 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: WILLARD MAGINNES

SECY

05/01/2005

Electronic Signature of Signing Officer or Director

Date