2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000134991

Current Mailing Address:

Entity Name: NORTH FLORIDA SIGNS AND GRAPHICS, INC.

FILED Jul 31, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1310 N MAIN STREET 4239 SUNBEAM ROAD JACKSONVILLE, FL 32206 SUITE 7

SUITE 7 JACKSONVILLE, FL 32256

New Mailing Address:

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1310 N MAIN STREET PO BOX 23519

JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32241

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRILEY, D. RANDALL 135 PROFESSIONAL DRIVE STE 101 PONTE VEDRA BEACH, FL 32082 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: D. RANDALL BRILEY

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:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 FLORETE, ORLANDO G JR MD
 Name:
 FLORETE, ORLANDO G JR MD

 Address:
 820 PRUDENTIAL DRIVE STE 111
 Address:
 1325 SAN MARCO BLVD, SUITE 401

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: DTS () Delete Title: DTS (X) Change () Addition

Name: GUTHRIE, TRAVIS Name: GUTHRIE, TRAVIS

Address: 820 PRUDENTIAL DRIVE STE 111 Address: 1325 SAN MARCO BLVD, SUITE 401 City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: JACKSONVILLE, FL 32207

Title: DP (X) Delete Title: () Change () Addition

 Name:
 BARONE, SEBASTIAN
 Name:

 Address:
 1310 N MIAN STREET
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:

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: TRAVIS GUTHRIE DTS 07/31/2007

Electronic Signature of Signing Officer or Director

Date