

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000000851

Entity Name: SIGN SERVICES NETWORK, INC.

FILED  
Jun 18, 2009  
Secretary of State

## Current Principal Place of Business:

1545 SANDBRIDGE ROAD  
VIRGINIA BEACH, VA 23456

## New Principal Place of Business:

## Current Mailing Address:

3925 MOORES LAKE RD.  
DOVER, FL 33527

## New Mailing Address:

5517 VAN DYKE ROAD  
LUTZ, FL 33558

FEI Number: 20-8146336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDREASEN, ALLAN B  
3925 MOORES LAKE ROAD  
DOVER, FL 33527 US

## Name and Address of New Registered Agent:

ANDREASEN, ALLAN B  
5517 VAN DYKE ROAD  
LUTZ, FL 33558 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:

06/18/2009

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: PST ( ) Delete  
Name: SHEFFIELD, DAVID  
Address: 5517 VAN DYKE ROAD  
City-St-Zip: LUTZ, FL 33558

Title: V (X) Delete  
Name: SHEFFIELD, BARBARA  
Address: 5517 VAN DYKE ROAD  
City-St-Zip: LUTZ, FL 33558

Title: V (X) Delete  
Name: SHEFFIELD, JEREMIAH  
Address: 1545 SANDBRIDGE ROAD  
City-St-Zip: VIRGINIA BEACH, VA 23456

## 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 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: DAVID SHEFFIELD

P

06/18/2009

Electronic Signature of Signing Officer or Director

Date