## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000014091

GLOVER BROTHERS SIGNS, INC.

Principal Place of Business	Mailing Address 3466 W WASHINGTON STREET ORLANDO FL 32811		
3466 W WASHINGTON STREET ORLANDO FL 32811			
Principal Place of Business	2a. Mailing Address		

**FILED** Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90119 012 \*\*\*150.00



					DO NOT WRITE IN THIS S	PACE		
					3. Date Incorporated or Qualifed 02/18/1994			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
21		26			59-3227197	No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt # etc		-	5. Certificate of Status Desired	\$8.75 A		
22		27			3. Certificate di Otatos Besilio	Fee Re	quired	
City & State		City & State	City & State		Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zıp	Countr	y	This corporation owes the current year Intar		_ [	
24	25	29 3	0		Personal Property Tax. 🗹 Yes 🗋 No			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	gent		
			8	Name				
BRITT, WILLIE B JR				82 Street Address (P.O. Box Number is Not Acceptable)				
3466 W WASHINGTON STREET			0	Street Address (F.O. Box Not House is Not Acceptable)				
ORLANDO FL 32811			8	3				
			8-	City	rı .	85 Zip 0	Code	
				<u></u>	<u>FL</u>	Ш		
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, if am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature: typed or printed name of registered agent	and title if applicable (NOTE R	Registered Ag	ent signature required	d when reinstating) DATE			
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PVST	( DELETE	1 1 TITLE			Change	nodibbcA []	
NAME	BRITT, WILLIE B JR		12 NAME					
STREET ADDRESS	3466 W WASHINGTON STREET		13 STRE	T ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32811		14 CITY-	ST-ZIP				
TITLE		☐ DELETE	2 1 TITLE			Change	Addition .	
NAME	22 N		22 NAME					
STREET ADDRESS			23 STRE	ET ADDRESS				
CITY-ST-ZIP	1		2 1 CITY					
TITLE			3 : TITLE	<u> </u>		Change	Addition	
NAME	_ <b>_ µ</b> ·		3 2 NAME					
STREET ADDRESS			A	T ADDRESS			j	
			34 CITY	•				
CITY-ST-ZIP		☐ DELETE	4 1 TITLE	31.211		Change	Addition	
1			4 2 NAMI					
NAME			5	T ADDRESS				
STREET ADDRESS			i i					
CITY-ST-ZIP		□ DELETE	4.4 CITY-	ST-ZIP		Change	Addition	
TITLE			5 1 TITLE 5 2 NAME					
NAME			3	ET ADDRESS				
STREET ADDRESS								
CITY-ST-ZIP		O BELETE	5.4 CITY- 6.1 TITLE			Change	Addition	
TITLE		□ DELETE	6			☐ change		
NAME			62 NAME					
STREET ADDRESS			63STRE	ETADDRESS			1	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: