

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 29 1997 8:00am  
Secretary of State

DOCUMENT # P94000059386 (0)

1. Corporation Name

OVER-THE-ROAD ADVERTISING, INC.



Principal Place of Business

14155 US HIGHWAY ONE  
SUITE 304  
JUNO BEACH FL 33408  
US

Mailing Address

14155 US HIGHWAY ONE  
SUITE 304  
JUNO BEACH FL 33408-1442  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

08/05/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0520393

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

THOMAS, THOMAS J  
14155 US HWY ONE  
SUITE 304  
JUNO BEACH FL 33408

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I 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: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME ABBE, JOHN  
STREET ADDRESS 63014 BARTERS ISLAND  
CITY-ST-ZIP BOOTHBAY ME

TITLE DPT ☐ DELETE

NAME SCHOEPP, ROBERT H  
STREET ADDRESS 15660-121ST TERRACE N  
CITY-ST-ZIP JUPITER FL

TITLE DVS ☐ DELETE

NAME THOMAS, THOMAS J.  
STREET ADDRESS 14155 US HWY ONE SUITE 304  
CITY-ST-ZIP JUNO BEACH FL

TITLE DV ☐ DELETE

NAME MAXWELL, WILLIAM R.  
STREET ADDRESS 4543 STOW ROAD  
CITY-ST-ZIP STOW OH

TITLE VP ☐ DELETE

NAME DRIZIN, JEROME  
STREET ADDRESS 1940 W BAY DRIVE SUITE 4  
CITY-ST-ZIP LARGO FL

TITLE D ☐ DELETE

NAME ALLEN, CLIFFORD C.  
STREET ADDRESS 3211 SW 42ND STREET  
CITY-ST-ZIP OCALA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

*Robert H. Schopp*

4-27-97

571-775-0126

CR2E034 (9/96)