

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000035569

Entity Name: FLORIDA LOGOS, INC.

FILED
Mar 18, 2008
Secretary of State

Current Principal Place of Business:

3764 NEW TAMPA HWY
LAKELAND, FL 33815 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 66338
BATON ROUGE, LA 70896 US

New Mailing Address:

FEI Number: 65-0671887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEWART, T EVERETT
Address: 5551 CORPORATE BLVD
City-St-Zip: BATON ROUGE, LA

Title: VD () Delete
Name: REILLY, KEVIN JR
Address: 5551 CORPORATE BLVD
City-St-Zip: BATON ROUGE, LA

Title: VP () Delete
Name: REILLY, SEAN
Address: 5551 CORPORATE BLVD.
City-St-Zip: BATON ROUGE, LA 70808 US

Title: S () Delete
Name: MCILWAIN, JAMES
Address: 5551 CORPORATE BLVD
City-St-Zip: BATON ROUGE, LA 70808

Title: TD () Delete
Name: ISTRE, KEITH A
Address: 5551 CORPORATE BLVD
City-St-Zip: BATON ROUGE, LA

Title: V () Delete
Name: HENNOSY, ANDREW
Address: 3764 NEW TAMPA HWY
City-St-Zip: LAKELAND, FL 33815

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:

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: KEITH ISTRE

CFO

03/18/2008

Electronic Signature of Signing Officer or Director

Date