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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000054186 (7)**

A AFFORDABLE SIGN CO. OF BREVARD, INC.

Principal Place of Business Mailing Address 9100 ELLIS RD., UNIT A 9100 ELLIS RD., UNIT A MELBOURNE FL \$2904-1037 MELBOURNE FL 32904-1037 3. Date Incorporated or Qualified 3a. Date of Last Report 06/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zio Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SANTORE, MICHAEL A CLAUDE **526 SACRE COEUR DR.** Street Address (P.O. Box Number is Not Acceptable) 82 **MELBOURNE FL 32935** NEW YORK 83 Zip Code 32904 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 from only accept the obligations of Section 607.0505, Florida Statutes. 64 (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change DELETE Addition **1018** 1 1 JITLE VANDIVER, CLAUDE NAME 1.2 NAME 2455 NEW YORK ST. STREET ADDRESS 13 STREET ADDRESS MELBOURNE FL 32904 1.4 CITY-ST-ZIP CITY-SI-ZIP DELETE Change ___ Addition THE 21 TITLE VP. + VANDIVER, SHIRLEY 2.2 NAME NAME 2455 NEW YORK ST. STREET ADDRESS 2.3 STREET ADDRESS MELBOURNE FL 32904 CITY - ST- ZII 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS CITY - S1 - ZIP 3.4. CITY-ST-ZIP DELETE 4 1 TITEF Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-7IP 4.4 CiTY - ST - ZiP DELETE Addition TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY - \$1 - ZIP 5 4 CITY - ST - ZIP DELETE 61 TITLE Change Addition TIJLE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

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

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

6.4 CITY - ST - ZIP

SIGNATURE:

CHTY-ST-Z(F

FILED

Jan 31 1997 8:00am

Secretary of State