2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

SIGNATURE:

DOCUMENT # P96000100161 04 HAR 16 AH 10: 41 1. Entity Name REVOLUTION OUTDOOR ADVERTISING, INC. TALL ATTING OF STORE Principal Place of Business Mailing Address 5551 CORPORATE BOULEVARD., 2-A P.O. BOX 66338 **BATON ROUGE LA 70808 BATON ROUGE LA 70896-6338** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State Applied For 4. FEI Number 59-3418650 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD Delete ☐ Change Addition TITLE NAME REILLY, KEVIN JR NAME STREET ADDRESS 5551 CORPORATE BOULEVARD., 2-A STREET ADDRESS CITY-ST-ZIP **BATON ROUGE LA 70808** CITY-ST-ZIP **VPTD** TITLE ☐ Delete TITLE ☐ Change Addition NAME ISTRE, KEITH NAME 100029964851 5551 CORPORATE BOULEVARD., 2-A 03/05/04--01024--017 **1541.25 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BATON ROUGE LA 70808** CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME MARCHAND, GERALD H NAME STREET ADDRESS 5551 CORPORATE BLVD., STE. 2A STREET ADDRESS CITY-ST-7IP BATON ROUGE LA 70808 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCILWAIN, JAMES NAME NAME 5551 CORPORATE BOULEVARD., 2-A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BATON ROUGE LA 70808 CITY-ST-7IP TITLE ☐ Delete ☐ Change Addition TITLE REILLY, SEAN NAME NAME 5551 CORPORATE BLVD. STREET ADDRESS STREET ADDRESS **BATON ROUGE LA 70808** CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change ☐ Addition STEWART, T. EVERETT NAME NAME 5551 CORPORATE BLVD., STE. 2A STREET ADDRESS STREET ADDRESS **BATON ROUGE LA 70808** CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if