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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000036018 (4) DOCUMENT #

SWIFT IMPRINT DEVICES AND SIGNS, INC.

Principal Place of Business

Mailing Address

FILED Feb 19 1998 8:00am Secretary of State



GAINESVILLE FL 32608		10105 SOUTH WEST 67TH DRIVE GAINESVILLE FL 32608						
		CHINECOTIESE TE 02000			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					04/21/1997		İ	
	Place of Business	2a. Mailing Address			4. FEI Number	A	pplied For	
	NW 23rd Nue SKB		<u>rd /-</u>	we_	59 -3443919		ot Applicable	
Sulte, Apt 22	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional equired	
City & Sta	le T.	City & State	+		6. Election Campaign Financing	\$5.00	May Be	
23 6	nesulle the	28 Camesville	<u>.</u> +	<u>ر</u>	Trust Fund Contribution		to Fees	
24 32(Country	Zip	Counti	•	8. This corporation owes or has paid the o			
24 ろん	25 /3 2huz	4 <u>4 1 1 1</u>	30 /77	Neltus			· No	
	······································	redistated widelit	8.	1 Name	10. Name and Address of New Registere	d Agent		
DANIEL, THOMAS A				Name	'			
623 NORTH MAIN STREET Gainesville FL 32601				2 Street Add	dress (P.O. Box Number is Not Acceptable)			
				83				
			0	<u> </u>				
			84	City		85 Zip (Code	
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above	ro-named cor	poration submits this statement for the purpose	-1 -1	in contains of	
DINCE OF	redistered adear of both in the State of	Florida Such change was all	itharizad r	witho openara	ation's board of directors. I hereby accept the ap	or changing it ppointment as	s registered registered	
agent. i a	am familiar with, and accept the obligation	ins of, Section 607.0505, Flori	ida Statute	tS,			Ĭ	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if conficetile. /NOTE	Donislared As	ant signature con-	ired when reinslating) DATE			
12.	OFFICERS AND I		13.	Junt elBustore redoi	ADDITIONS/CHANGES TO OFFICERS AF	ID DIRECTOR	S IN 12	
TITLE	& President	☐ DELET E	1.1 TITLE		ADDITIONO/OF WINDERS TO OFF TOLKION	Change	Addition	
NAME	JENSEN, HEIDI		1.2 NAME					
STREET ADDRESS	10105 SOUTH WEST 67TH DRI	/E		T ADDRESS				
CITY-ST-ZIP	GAINESVILLE FL 32608	-	1.4 C/TY-	•			13	
TITLE	VICE President	DELETE	21 TITLE	J, 24		Change	Addition	
NAME	Dustin Louis Cuttrell		2.2 NAME			_ ,	_	
STREET ADDRESS	10105 SW 67 4 Drive	L	2.3 STREE	T ADDRESS				
CITY-ST-ZIP	Gamesville , FL 32	608	2. 4 CITY-	ST-ZIP				
TITLE	Secretary	DELETE	3.1 TITLE			☐ Change	Addition	
NAME	corey Ann Cottrell .	,	3.2 NAME					
STREET ADDRESS	loios sin byth Driv		3.3 STREE	T ADDRESS	,			
CITY-ST-ZIP	Garneiville, FL 321	.08	3.4. CITY-	ST-ZIP				
TITLE	Treasurer	DELETE	4.1 TITLE			Change	☐ Addition	
NAME	william Jenson Cott	irell	4. 2 NAME					
STREET ADDRESS	10105 SW 6742 Drive	i "	4.3 STREE	T ADDRESS				
CITY-ST-ZIP	Garasville, FL 3:	2608	4.4 CITY-5	ST-ZIP				
TITLE	·	DELETE	5.1 TITLE			Change	■ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS			-	
CITY-ST-ZIP			5.4 CITY - 9	ST-ZIP				
TITLE		☐ DELET e	6.1 TITLE			☐ Change	☐ Addition	
NAME			6.2 NAME	ļ	•			
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY- S	iT - ZIP				
officer or	on this annual report of stronlemental ar	inual report is true and accura r or trustee empowered to exe	ate and th	at mu sionatui	Section 119.07(3)(i), Florida Statutes, I further or the shall have the same legal effect as if made under united by Chapter 607, Florida Statutes; and that	ndor oath: the	tiom on i	