

FILED
Jun 06, 2002 8:00 am
Secretary of State

06-06-2002 90085 004 ***550.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000041105

1. Entity Name

STANDARD ADVERTISING CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Crosswind Corporate Park

3. Mailing Address
Crosswind Corporate Park

Suite, Apt. #, etc.
P.O. Box 460

Suite, Apt. #, etc.
P.O. Box 460

City & State
Bridgeport, WV

City & State
Bridgeport, WV

4. FEI Number 59-3448632

Applied For
Not Applicable

Zip
26330

Country
U.S.A.

Zip
26330

Country
U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
R. Reid Haney

Street Address (P.O. Box Number is Not Acceptable)
101 E. Kennedy Boulevard

Suite 4100

City
Tampa

FL

Zip Code
33602

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D Ronald W. Hill 908 Worthington Drive Bridgeport, WV 26330	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP/D Cynthia L. Hill 908 Worthington Drive Bridgeport, WV 26330	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. I 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald W. Hill, President

6/3/02

304-842-10770

Daytime Phone #

CR2E034B (12/01)