

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 02, 2002 8:00 am**  
**Secretary of State**

04-02-2002 90896 046 \*\*\*150.00

0037880 AV

**DOCUMENT # P97000049014**

1. Entity Name

**OUTDOOR ADVERTISING SERVICES, INC.**

Principal Place of Business

**3015 HARTLEY ROAD  
 SUITE 8C  
 JACKSONVILLE FL 32257**

Mailing Address

**3015 HARTLEY ROAD  
 SUITE 8C  
 JACKSONVILLE FL 32257**

2. Principal Place of Business

**8130 Baymeadows Way**

Suite, Apt., etc.

**Suite 303**

City & State

**Jacksonville FL**

Zip

**32256**

Country

3. Mailing Address

**8130 Baymeadows Way**

Suite, Apt., etc.

**Suite 303**

City & State

**Jacksonville FL**

Zip

**32256**

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

**59-3414621**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**DEANGELO, DEBORAH**

**3015 HARTLEY ROAD**

**STE 8C**

**JACKSONVILLE FL 32257**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>DEANGELO, DEBORAH</b>	
STREET ADDRESS	<b>12438 IVY WOODS CT</b>	
CITY-ST-ZIP	<b>JACKSONVILLE FL 32258</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HOFFMAN, DAVID G</b>	
STREET ADDRESS	<b>9461 BEAUCLERC COVE ROAD</b>	
CITY-ST-ZIP	<b>JACKSONVILLE FL 32257</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>David Hoffman</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>13810 Sutton Park Drive North</b>	
STREET ADDRESS	<b>Unit 415</b>	
CITY-ST-ZIP	<b>Jacksonville, Florida 32224</b>	
TITLE	<b>David Hoffman</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>13810 Sutton Park Dr. N.</b>	
STREET ADDRESS	<b>Unit 415</b>	
CITY-ST-ZIP	<b>Jacksonville FL 32224</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

**Deborah De Angelo**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/7/02**

Date

**(904) 262-0156**

Daytime Phone #

CR2E034 (9/01)