2000 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jul 25, 2000 8:00 am
Secretary of State
06-06-2000 90008 010 ***150.00

DOCUMENT # P98000051768

1. Entity Name
SIGNCRAFT BROTHERS, INC.

Principal Place of Business	Mailing Address
# BOX 576 CITY FL 32024	RT.9 BOX 576 LAKE CITY FL 32024-8950

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Rt 11 Box 30118 Suite, Apt. #, etc.	Rt 11 Box 30118 Suite, Apt. #, etc.
City & State: Lake City, FL	City & State: Lake City, FL
Zip: 32024 Country: USA	Zip: 32024 Country: USA

4. FEI Number 59-3520654 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JOHNSON, JAMES E JR. RT.9 BOX 576 LAKE CITY FL 32024	Name: James E. Johnson, JR Street Address (P.O. Box Number is Not Acceptable): Rt 17 Box 1888 City: Lake City FL Zip Code: 32055

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: _____ DATE: 7/19/00
Signature of one of the above named Registered Agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 1st 2000, 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT JOHNSON, JAMES E JR 4209 HWY 90 W BOX 301 LAKE CITY FL 32055	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT JOHNSON, JAMES E JR RT. 17 BOX 1888 LAKE CITY, FL 32055	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT FITTER, MATT RT 5 BOX 681-7 LAKE CITY FL 32024	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Matt Etter	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CAMPBELL, PAUL RT 17 BOX 1888 LAKE CITY FL 32055	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER SMITH, DEAN RT 17 BOX 1940 LAKE CITY FL 32055	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT James E Johnson Route 17 Box 1846 Lake City FL 32055	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY Randall J. Welsh Route 11 Box 18 Lake City FL 32024	☐ Change ☒ Addition

CR2E034 (9/99)

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: James E Johnson, JR President 07/20/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date

ORIGINAL