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

PROFÎT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000096954

1. Corporation Name

BRYANT SIGNS ESCROW, INC.

Mailing Address	
2201 CANTU COURT #102A SARASOTA FL 34232	
	2201 CANTU COURT #102A

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90079 005 ***150.00



<u></u>							
Principal Place of Business Mailing Address							
2201 CANTU COURT #102A 2201 CANTU COURT #102A							
SARASOTA FL 34232 SARASOTA FL 34232					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					11/17/1998		
2 Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number Applied For		
21		26			65-0876631 Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.				_	\$8.75 Additional		
27					5. Certificate of Status Desired Fee Required		
City & State City & State					6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country	,	8. This corporation owes the current year Intangible		
24	25	29	o		Personal Property Tax. Yes XNo		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent		
			81	Name			
	PORATION SERVICE COMPANY		82	Street	Address (P.O. Box Number is Not Acceptable)		
	HAYS STREET						
TALL	AHASSEE FL 32301-2525		83				
	•		84	City	FL 85 Zip Code		
				L			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
	Signature, typed or printed name of registered agent			nt signature	required when reinstating) DATE DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition		
TITLE	PSD	DELETE	1.1 TITLE		. Charge Chaudion		
NAME	BIDDINGER, JOHN W	11 480-	1.2 NAME				
STREET ADDRESS	7491 ALBERT TILLINGHAFT DR	IVE	•	T ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34240		1.4 CITY- S	T-ZIP	XX Change Addition		
TITLE	V	☐ DELETE	2.1 TITLE		Vice President		
NAME	HOETGER, JAMES	ds at-	2.2 NAME		Hoetger, James A.		
STREET ADDRESS	7491 ALBERT TILLINGHAFT DR	IVE	2.3 STREE	TADDRESS	2201 Cantu Court, Suite 102A		
CITY-ST-ZIP	SARASOTA FL 34240		2. 4 CITY-	ST-ZIP	Caracaba Planida 34232-6254		
TITLE		☐ DELETE	3.1 TITLE		Change — Addition		
NAME			3.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-\$T-ZIP			3 4. CITY	ST-ZIP	Change Addition		
TITLE		☐ DELETE	4.1 TITLE		Change Addition		
NAME			4, 2 NAME				
STREET ADDRESS				T ADDRESS	·		
CITY-ST-ZIP	<u></u>		4.4 CITY-5	T-ZIP	Change Addition		
TITLE		☐ DELETE	5.1 TITLE		☐ Cutange ☐ Nation (
NAME			5.2 NAME	T 4000550			
STREET ADDRESS	•		1	TADDRESS]		
CITY-ST-ZIP			5.4 CITY-5	T-ZIP	Change T Addition		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAME			6.2 NAME		1		
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			6.4 CITY-5	T-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James A. Hoetger SIGNING OFFICER OR DIRECTOR

1/25/99

(941) 377-6710

Daytime Phone #