2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110247

Entity Name: LAMAR FLORIDA, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:			New Prir	New Principal Place of Business:		
5551 CORPORATE BLVD. SUITE 2A BATON ROUGE, LA 70808				5551 CORPORATE BLVD. BATON ROUGE, LA 70808		
Current Mailing Address:			New Mai	New Mailing Address:		
	_		Wew man	iiig Addie33	•	
PO BOX 60 BATON RO	6338 DUGE, LA 70:	308				
FEI Number:	72-1467178	FEI Number Applied For ()	FEI Number Not Ap	plicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name an	d Address of	New Registered Agent:	
155 OFFIC SUITE A TALLAHAS	SSEE, FL 323					
	named entity e of Florida.	submits this statement for the pi	urpose of changing	j its registered	I office or registered agent, or both,	
SIGNATUF	RE:					
	Electro	nic Signature of Registered Age	nt		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP (REILLY, JR., K 5551 CORPOR BATON ROUG	ATE BLVD	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	REILLY, SEAN	ATE BLVD., STE. 2A	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	S (MCIWAIN, JAN 5551 CORPOR BATON ROUG	ATE BLVD	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	T (ISTRE, KEITH 5551 CORPOR BATON ROUG	A ATE BLVD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (LAMAR, CHAR 5551 CORPOR BATON ROUGI	ATE BLVD	Title: Name: Address: City-St-Zip:		() Change() Addition	
Title: Name: Address: City-St-Zip:	MARCHAND, G	ATE BLVD., STE 2A	Title: Name: Address: City-St-Zip:	MARCHAND, 5551 CORPO	(X) Change()Addition GERALD DRATE BLVD. GE, LA 70808	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH ISTRE CFO 04/23/2007