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FILED  
May 01 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S17044 (6)

1. Corporation Name

FT. MYERS TRIM & SIGN, INC.

Principal Place of Business

Mailing Address

3775A FOWLER ST  
FT MYERS FL 33901  
US

3775 A FOWLER ST  
FT. MYERS FL 33901  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/14/1990

4. FEI Number

65-0223361

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, JOHN B.  
905 WILLARD AVE.  
LEHIGH ACRES FL 33970

81 Name

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

83

84 City

FL

85 Zip Code

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-22-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DPM  
MILLER, JOHN B.  
905 WILLARD AVE  
LEHIGH ACRES FL

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
MILLER, PAUL F  
121 ROBERT AVE  
LEHIGH ACRES FL

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
MILLER, JAMES L.  
OLD SUMMERSET RD  
MT VERNON KY

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
ST  
MILLER, JOANN  
905 WILLARD AVE  
LEHIGH ACRES FL

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
Change  
Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP  
Change  
Addition

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.

SIGNATURE

John Miller

4-22-98 941-939-2343

CR2E034 (10/97)