FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT FILED Secretary of State 1997 DIVISION OF CORPORATIONS 97 MAY 14 PM 1: 08 (0)DOCUMENT # **V03542** SEGRETARY OF STATE R & W SIGNS, INC. Principal Place of Business Mailing Address 9470 ULMERTON ROAD 9470 ULMERTON ROAD LIMIT 5C UNIT 5C LARGO FL 33771-3700 LARGO FL 33771 3. Date Incorporated or Qualified 3a. Date of Last Report 12/27/1991 05/01/1996 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 59-3099285 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RYALS, ROBERT 9470 ULMERTON ROAD 82 Street Address (P.O. Box Number is Not Acceptable) UNIT 5C 83 LARGO FL 33771 84 City Zip Code 85 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 Typica or printed name of registered agent and title if applicable (NOTE: Registered Agent argnature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Title 1.1 TULE 1.2 NAME RYALS, ROBERT NAME CR2E034 3251 GARRSISON RD 1.3 STREET MORESS AND AND THE STREET STHEET ADORESS PALM HARBOR FL 34683 1.4 CITY-ST-ZIP CITY - ST - 7IP DELETE Change Addition THLE 2.1 TITLE HATCHER, WANDA NAME 2.2 NAME 3251 GARRISON RD STREET ADORESS 2.3 STREET ADDRESS PALM HARBOR FL 34683 CITY-ST ZIP 2 4 CITY-ST-ZIP THEF DELETE 3.1 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST 749 3 4. CITY-\$1-ZIP  $1{:}\Pi \mathcal{X}$ DELETE 4.1 TITLE Change \_\_\_ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-\$T-ZIP City St. 70 DELETE Change Addition TITLE 5.1 TITLE NAM 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHY\_S1-74P DELETE TITLE 6.1 TITLE NAMÉ 6.2 NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY-ST-ZIP CITY-ST-ZF

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

Lam an officer or director of the corporation or the receiver or trustee appears in Block 12 or Block 13 if a hanged of on an attachment with

14. I do 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 have 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 legat 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