

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90177 035 \*\*\*150.00

DOCUMENT # V05119

1. Corporation Name

AFFORDABLE DISPLAYS, INC.



Principal Place of Business

2030 CALUMET ST  
SUITE 202  
CLEARWATER FL 33765  
US

Mailing Address

2030 CALUMET ST  
SUITE 202  
CLEARWATER FL 33765  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1992

4. FEI Number

59-3100408

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 2270 Lagoon Drive

2a. Mailing Address

26 2270 Lagoon Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Dunedin FL

City & State

28 Dunedin FL

Zip Country

24 34698 25 US

Zip Country

29 34698 30 US

9. Name and Address of Current Registered Agent

ALBURTUS, KENNETH  
2030 CALUMET ST  
CLEARWATER FL 33765

10. Name and Address of New Registered Agent

81 Name

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

2270 Lagoon Drive

83

84 City Dunedin, 1

FL

85 Zip Code 34698

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE  
NAME BLANCHETTE, ROBERTA L  
STREET ADDRESS 2270 LAGOON DR.  
CITY-ST-ZIP DUNEDIN FL

TITLE VPST ☐ DELETE  
NAME ALBURTUS, KENNETH A  
STREET ADDRESS 2270 LAGOON DR.  
CITY-ST-ZIP DUNEDIN FL

TITLE VP ☐ DELETE  
NAME BLANCHETTE, TERESA  
STREET ADDRESS 3034 EASTLAND BLVD D-109  
CITY-ST-ZIP CLEARWATER FL 34621

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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: Kenneth A. Alburtus 2/11/99 (727)461-3083  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)