

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
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90279 027 ***150.00

DOCUMENT # V59807

1. Corporation Name
GENE'S SIGN COMPANY, INC.

Principal Place of Business
2401 HANCOCK BRIDGE PARKWAY
CAPE CORAL FL 33990

Mailing Address
2401 HANCOCK BRIDGE PARKWAY
CAPE CORAL FL 33990

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/25/1992

4. FEI Number
65-0352680

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

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COLLMAN, RICHARD A
2340 PERIWINKLE WAY
SUITE 1-2
SANIBEL FL 33957

81 Name SANDRA TOCHER

82 Street Address (P.O. Box Number is Not Acceptable)
11625 PALM AVE 6-B

83

84 City NORTH FORT MYERS FL 85 Zip Code 33903

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

Sandra Tocher

21 APRIL 1999

Signature, typed or printed name of registered agent and title if applicable.

(NOT: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☒ DELETE

TITLE P
NAME TOCHER, J. P
STREET ADDRESS 2908 NELSON ST
CITY-ST-ZIP FT MYERS FL

TITLE D
NAME TOCHER, SANDRA J
STREET ADDRESS 2908 NELSON ST
CITY-ST-ZIP FT MYERS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☒ Addition

1.1 TITLE VP
1.2 NAME SANDVIG, DAVID D.
1.3 STREET ADDRESS 1703 VISCAYA PKWY,
1.4 CITY-ST-ZIP CAPE CORAL, FL. 33990

2.1 TITLE P
2.2 NAME TOCHER, SANDRA J
2.3 STREET ADDRESS 11625 PALM AVE 6-B
2.4 CITY-ST-ZIP N. FT. MYERS FL ☒ Change ☐ Addition

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

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

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

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, with a letter like empowered.

SIGNATURE:

Sandra Tocher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

21 APRIL/99 941-997-5753

Date

Daytime Phone #

CR2E034 (11/98)